L18000000820

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Y. SCOTT FEB - 8 2022

COVER LETTER

TO: Registration Se Division of Cor				
COASTAL	REALTYEXPERTS.COM. LL	.C		
SUBJECT:	Name of Limi	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	John R Avritt			
		Name of Person		
	coastalrealtyexperts.com, l	lc		
	<u></u>	Firm/Company	-1 <u>m</u>	2022
	811 North Reus St		ORETA ALLA	
		Address	A F.Y	28
	Pensacola, FL 32501		SSEE S	
		City/State and Zip Code	, FL	5 -
	jravritt@gmail.com	to be used for future annual report no	ification)	7
Car Carbon information	E-mail address: (concerning this matter, please c		incaciony	
John Avritt	concerning this matter, preuse c	850 449-7214		
	of Person	at ()	me Telephone Number	_
	••••			
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing F Certificate of S Certified Copy (additional copy)	Status &
<u>Mailing Addre</u> Registration		Street Address: Registration S		
Division of Corporations		Division of Co The Centre of		
P.O. Box 63. Tallahassee,			oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/02/2018	and assigned
Florida document number 1.18000000820		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
COASTAL RIDGE HOLDINGS LLC	=	2022 SE(
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	e abbreviation "late"."
Inter new principal offices address, if applicable:	811 NORTH REUS ST	
nter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>	ſ	20 m NI_
		FS 2 O
Inter new mailing address, if applicable:	811 NORTH REUS ST	TE 7
nter new mailing address, if applicable: **Idailing address MAY BE A POST OFFICE BOX**)	PENSACOLA, FL 32501	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	nddress on our records, <u>enter the n</u>	ame of the new regi
Name of New Registered Agent:	4 	
New Registered Office Address:	Enter Florida strvet address	
	, Florida	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			☐ Change
			□Add
			Remove
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fective date, if ot an effective date is list ote: If the date inso ocument's effective	erted in this block	does not meet t	ne applicable s	of filing or more the	(option an 90 days after the uirements, this	n al) iling.) Pursuant to 60 date will not be lis	05.020° sted as
record specifies a d is filed.	elayed effective da	ite, but not an e	ffective time, a	t 12:01 a.m. on th	e earlier of: (b)	The 90th day af	ier the
ated)22	_			
	Ilina	Peri	//	representative of a	member		
	Sig	nature of a memi	ner oCaumonzea	representative or w			