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COVER LETTER

Division of Corporations
UBJECT: Coastal Wood Worx
Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Coastal wood work
Name of Person
Coastal work Firm/Company
2060 20H Ave NE
Address
Naples, FL 34120
Coustal Woodwarx Qyahoonon
E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call:
or further information concerning this matter, please call:
Graham Bruson at (237) 285-5422 Name of Person Area Code Daytime Telephone Number
nclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$\Bigcu

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coast	al 1200	d worx	/	
(Name of the Limited			n our records.)	
The Articles of Organization for this Limited Liab Florida document number \(\begin{align*} \begin{align*} \beg	bility Company w	vere filed on	1-9-20	8 and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabili	ty company here	:	
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company," the desig	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	Graha	n Brus	son
(Principal office address MUST BE A STREET	ADDRESS)	2060 Naples	2019 AV	e NE 4120
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	2060 Naple	2014 FL	Ave NE 34120
B. If amending the registered agent and/or registered agent and/or the new registered office		ce address on or	ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Gra	han B	runson	
New Registered Office Address:	<u>2060</u>	20th Enter Florida	Ave NE street address	
	Naple	City	, Florida	34120 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 Changing Registered Agent, Signature of New Registered Agent

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
MGR	Graham Brunson	2060 2044 Ave NE N.p.L.	12 O Add
		2060 2011 Are NE	Remove Naples FLJ412 C D'Change
			🗅 Add
			C Remove
			Change
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			☐ Change
			Add
			☐ Remove
			Change

II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
an ef l <u>ote:</u>	tive date, if other than the date of filing:
e re The	ccord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
ated	10.31
	Signature of afficmber or authorized representative of a member
	(ocaham 15040500

Page 3 of 3

Filing Fee: \$25.00