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SECRETARY OF SATIONS
DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Coastal	Fine Fuen, 4	JEC, LLC Company	
The enclosed Articles of Amendment and	fee(s) are submitted for fili	ng.	
Please return all correspondence concerni	ng this matter to the follow	ing:	
	Donna All	ARD	
	Name o	f Person	
	Coastal fine	Furnitu	e,clc
	rim/C	ompany	
4(d	71 100th Mc	uj N.	
	Add	iress	
St	. Peters bue City/State a	19, FC 33	707
	-mail address: (to be used for	ia act con	<u>^-1</u>
ŀ	-mail address: (to be used for	uture annual report notifi	ication)
For further information concerning this n	atter, please call:		
Donne Mard	m (	127 , 1574.	8.74-1
Donna Allard Name of Person	at ( Ar	ca Code Daytime	Telephone Number
Enclosed is a check for the following amo	ount:		
\$25.00 Filing Fee		Filing Fee & fied Copy onal copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Coastal fine f	venituee, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000520137</u> .	were filed on2   27   18	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		SECRET
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		THE CORPORATIONS
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		e name of the new
Name of New Registered Agent:		
New Registered Office Address:	finter Florida street address	
	, Florida	Ziv Code
	On	emp 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>	Name	Address	Type of Action
AMBR	Samuel Little	7838 Couseway BND	Add
		St. Peters burg, fc	□ Remove
		33707	Change
	·····		
			Remove
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lf an effec <u>Note:</u> If	e date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	;.) Pursuant to 605	5.0207 ed as
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. 0th day after the record is filed.	on the earlie	er o
Dated _	may 19 , 2018.		
	Signature of a member or authorized representative of a member		
	Typed or printed name of signee		

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Filing Fee: \$25.00