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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: COASTAL DRY ER Name of Lu	VENT CLEAN!	NG
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
R	DQUE MARINO Name of Person	-
COASTAL DR	LYER VENT CLE	ANING, LLC
	6066 HEATHER	<u> 5T.</u>
J ₀	PITER FL 334 City/State and Zip Code	58
	City/state and Zip Code Cleaning 561@C (to be used for future annual report now)	
For further information concerning this matter, please	call:	
Reque Marino Name of Person	at (<u>561</u>) <u>313</u> - Area Code Daytime	- 1265 c Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60,00 Filing Fee. Certificate of Status & Certified Copy cadditional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32344	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	n ations

Taflahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

18 JUN 27 PH 2:45 The Articles of Organization for this Limited Liability Company were filed on May 23rd, 2018 and assigned Florida document number <u>L 1800</u>0129269 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new

registered agent and/or the new registered office address here:

Name of New Registered Agent:	nla	
New Registered Office Address:	Enter Florida street ad	dress
		. Florida Zw 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Roque N. Marino	6066 Heather St.	Add
		Jupiter, FL 3345B	□ Remove
			Change
AMBR	Roque N. Marino	6066 Heather St.	Add
		Jupiter, FL 33458	•
			Change
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Fective date, if other than the date of filing: _ n effective date is listed, the date must be specific and car ote: If the date inserted in this block does not meet culnent's effective date on the Department of State	the applicable statutory fil	(optional) more than 90 days after filing.) Purs ing requirements, this date will r	uant to 605,0207 (3)(not be listed as the
record specifies a delayed effective date The 90th day after the record is filed.	, but not an effective	etime, at 12:01 a.m. on t	ne earlier of:
ted Jone 21st, 2018	uus Nainus		
Signature of a men	ber or authorized representati	ve of a member	

Page 3 of 3

Filing Fee: \$25.00