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Division of Corporations

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SUNCOAST CUSTOM MARINE CANVAS LLC

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Electronic Filing Menu Corporate Filing Menu

Help

## **COVER LETTER**

	lon Section of Corporations
	COAST CUSTOM MARINE CANVAS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	Cheyenne Moseley
	Name of Person
	Legalzoom.com, Inc.
	Firm/Company
	101 N. Brand Blvd., 11th Floor
	Address
	Glendale, CA 91203
	City/State und Zip Code
	michelerampe@gmail.com
	E-mail address: (to be used for future annual report potification)
For further information	ation concerning this matter, please call:
Cheyenne Mose	ey 800 773-0888 ext. 9724  at (
}	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	k for the following amount:
□ \$25.00 Filing	Fee
i e i e i I	MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327 - galacter and applied to the property of the

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

SUNCOAST CUSTOM MARINE		
(Name of the Limited (A	Liability Company as it now appears on our recor Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liab Florida document number 1.18000178504	ility Company were filed on 07/25/2018	and assigned
This amendment is submitted to amend the follow	ing:	<i>√</i> <b>6</b>
A. If amending name, enter the new name of th	e limited liability company here:	SE 511
Suncoast Marine Canvas LLC		
The new name must be distinguishable and end with the wor	rds "Limited Liability Company," the designation "I	.LC" or the abhreviation "L.L.C"
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
		<u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BC)  B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our recor	rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addi	ress
	, 1	Florida
	Crpy	Zip Code
New Registered Agent's Signature, if changing Reg	eistered Agent:	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the region company has been notified in writing of this ch	and complete performance of my duties, ered agent as provided for in Chapter 602 gistered office address, I hereby confirm	and I am familiar with and 5, F.S. Or, if this document is
	If Changing Registered Agent, Signatus	re of New Registered Agent

MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

Authorized Member being added or removed from our records:

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Aċd
			☐ Remove
			☐ Remove
		- ORemove	
			SEP TO LE DANGE CONTRACTOR REMOVE
<del></del>			☐ Add
			CINCINOTE
			Add
		□ Ветюус	

. If amending any other infor	nation, enter change(s) here: (Attach additional s	heets, if necessary.)
. Effective date, if other than (The effective date must be specific, of the date this document is filed by the	annot be prior to date of receipt or filed date and cannot be more	(optional) e than 90 days after
Dated 9/12	Signalure of a member or authorized representative of a n	NAME -
	Kurt Rampe	icinoc.
	Typed or printed name of signee	B SEP 19 PM 12: 0

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Filing Fee: \$25.00