L1900061570

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COVER LETTER

Div	ision of Coi	rporations		
SUBJECT:		ality Coatings		
SUBJECT	-	Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Nathaniel P. Taylor		
			Name of Person	
		Coastal Quality Coatings		
			Firm/Company	
		11140 Woodelm Drive We	est	Daytime Telephone Number See & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) EET/COURIER ADDRESS:
			Address	
		Jacksonville FL 32218		
			City/State and Zip Code	<u> </u>
		sbtrn1969@yahoo.com		
For further in	eformation c	oncerning this matter, please ca		zation)
		oncerning this matter, pieuse er		
Nathaniel P.				
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F		□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		ING ADDRESS:	STREET/COURIE Registration Section	

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coastal Quality Coatings, LLC		
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) y)
The Articles of Organization for this Limited I Florida document number L19000061570		March 4, 2019 and assigned
This amendment is submitted to amend the fol		
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	/or registered office address	on our records, enter the name of the new
Name of New Registered Agent:	Nathaniel P. Taylor	
New Registered Office Address:	11140 Woodelm Drive West	Florida street address
	Jacksonville City	, Florida 32218
	City	zajr Conte

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
AMBR	Nathaniel P.Taylor	11140 Woodelm Drive West Jacksonville FL 32218	Add
			Remove
			Change
			Remove
			Change
			Add
			□ Remove
			□ Change
	-1		Add
			□ Remove
			Change
			Add
			☐ Remove
			Change
			🗆 Remove
			□ Change

. If amending any other informat	tion, enter change(s) here:	(Attach additional she	ets, if necessary.)	•
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	t be specific and cannot be prior to ock does not meet the applicab	date of filing or more than sole statutory filing require	(optional) 00 days after filing.) Pursuant to ements, this date will not be	605.0207 (3 listed as th
the record specifies a delayed) The 90th day after the reco	l effective date, but not a ord is filed.	an effective time, al	: 12:01 a.m. on the ea	arlier of:
Dated March 25th	2019			
Mada	(e)	-		
7 0	Signature of a member or authorize	zed representative of a men	iher	_
- Nothani	e Te/for Typed or printed i	name of signer		_

Page 3 of 3

Filing Fee: \$25.00