## L19000087012

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	<del>_</del>
V	,	
(0)	10: 10: 10:	10
(Cit	ty/State/Zip/Phone	∋#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
	ocument Number)	
,	•	
Cartified Carios	Cortificator	of Status
Certified Copies	_ Certificates	o o status
Special Instructions to	Filing Officer:	
ı		

•

Office Use Only



400328412524

05/06/19--01024--014 \*+25.00

7.50 FILED 2019HAY -6 PH 5: 30

T GLASS MAY 2 0 2019

## **COVER LETTER**

	Registration Se Division of Cor					
CHD IEA	Cephas Co	astal, LLC				
SUBJEC	· I ·	Name of Limited Liability Company				
		Amendment and fee(s) are sub				
		Peter Bacopoulos				
			Name of Person			
			Firm/Company			
		3700 Capital Circle SE 80	3		** **	
		Tallahassee, Fl. 32311	Address		2019 HAY	3
City/State and Zip Code busy_child29@hotmail.com				-6 PH		
		E-mail address: (	to be used for future annual report notif	ication)	<u> </u>	<u>ר</u>
For furth	er information c	oncerning this matter, please ca	all:		30	
Peter Ba	copoulos		850 570-0267			
	Name o	f Person		: Telephone Number		
Enclosed	is a check for th	ne following amount:				
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &	
	MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:		

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

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cephas Coastal, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 03/29/2019 \_ and assigned Florida document number L19000087012 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 "LLC." 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: New Registered Office Address: Enter Florida street address

## 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 = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Change
<del></del>			Add
			Remove
			Change
			Add
			28 □Remove
			hange-
			Change
			🗖 Add
			Remove
			Change
			Remove
			Change

		<u> </u>				
		<u> </u>				
		:-	<del></del>			
	<del></del>					
				·		
					<del>.</del>	<del></del>
	· <u></u>					
						201b
	<u>.</u>				17.1	
						<u>-6</u>
		_				
					* •	ਨ ਨਾ
						<del>-</del>
<del></del>	<del></del> .					
<del></del>	-	<del> </del>			-	
Effective date, if other tha	in the date of filir	ng:		(optio	nal)	
If an effective date is listed, the d Note: If the date inserted in document's effective date or	this block does not	meet the applicab				
ne record specifies a de The 90th day after th			an effective ti	me, at 12:01 a	.m. on the $\epsilon$	earlier of
Dated April 24		2019				
			4			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00