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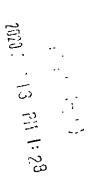
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	Registratio Division of	Section orporations
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SUBJEC	·1:	Name of Limited Liability Company
The enclo	osed Article	of Amendment and fee(s) are submitted for filing.
Please ret	turn all corr	pondence concerning this matter to the following:
		Peter Bacopoulos
		Name of Person
		Articles of Amendment and fee(s) are submitted for filling. all correspondence concerning this matter to the following: Peter Bacopoulos Name of Person Firm/Company 400 4th Avenue South 206 Address St. Petersburg, F1. 33701 City/State and Zip Code busy_child29@hotmail.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: pulos Name of Person at (Area Code Daytime Telephone Number check for the following amount: iting Fee S \$30.00 Filing Fee & \$\$60.00 Filing Fee.
		400 4th Avenue South 206
		Address
		St. Petersburg, FL 33701
		E-mail address: (to be used for future annual report notification)
For furthe	er informati	n concerning this matter, please call:
Peter Ba	copoulos	
	Na	e of Person Area Code Daytime Telephone Number
Enclosed	is a check f	the following amount:
\$25.0	00 Filing Fe	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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

	U	
ARTICLES OF (DRGANIZATION	ب
C	F	
Cephas Coastal LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	and assigned
The Articles of Organization for this Limited Liability Company	were filed on 03/29/2019	and aggious de so
Florida document number 1.19000087012	were med on	and assigned \ O
ionua document number		-
his amendment is submitted to amend the following:		
A If amonding name enter the service of the B. S. C. C.	912 <u>6</u>	
A. If amending name, enter the new name of the limited liab	ility company here:	
		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:	ress, if applicable: 400 4th Avenue South 206	
Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL 33701	
inter new mailing address, if applicable:	400 4th Avenue South 206	
Mailing address MAY BE A POST OFFICE BOX)	St. Petersburg, FL 33701	
Hailing dauress MAT BE A FOST OF FICE BOA		
Managed the state of the state		
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, <u>ente</u>	r the name of the new
and the new registered office address ner	±•	
Manage CNI De Care LA		
Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Florida street address	

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	<u>Address</u>	Type of Action
MGR	Peter Bacopoulos		Add
			□ Remove
		400 4th Avenue South 206 St. Petersburg, FL 33701	■ Change
			☐ Remove
			Change
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			Add
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ffective date, if other than the date an effective date is listed, the date must be sporter. If the date inserted in this block document's effective date on the Department.	oes not meet the appi	icable statutory filing	(optional) re than 90 days after filing, requirements, this date) Pursuant to 605.020' will not be listed as
e record specifies a delayed effe The 90th day after the record is	ective date, but r s filed.	ot an effective ti	me, at 12:01 a.m.	on the earlier o
ated August 7 TWO Signal	2020 Cobolina turo of a member of aut	horized representative of	of a member	
4.6			r w member	

Page 3 of 3

Filing Fee: \$25.00