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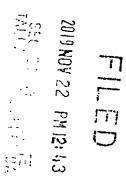
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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

Div	ision of Corp	orations			
SUBJECT:	COAST RE	GROUP LLC			
JO DOLLET,			ited Liability Company	<del></del>	
The enclosed	l Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		Heana Noa			
			Name of Person		
		Concorde Land Title Servi	ces Inc		
			Firm/Company		
	134 South Dixie Highway, Suite 100				
			Address		
		Hallandale Beach, FL 3300	09		
		inoa@concordelts.com	City/State and Zip Code	· • • • • • • • • • • • • • • • • • • •	
		E-mail address: (	to be used for future annual report notif	fication)	
For further is	nformation co	ncerning this matter, please co	all:		
Ileana Noa			305 3568403 at ()		
	Name of	Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a	a check for the	following amount:			
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

COAST RE GROUP 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 October 22, 2019 and assigned Florida document number \_L19000264890 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: 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.

City

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	Address	Type of Action
MGR	MATHIEU MARTINEAU	134 South Dixie Highway, Suite	
		Hallandale Beach, FL 33009	■ Remove
			Change
MGR	M. MARTINEAU	134 South Dixie Highway, Suite 100	
		Hallandale Beach, FL 33009	Remove
			Change
			□ Remove
		<del></del> -	Change
			Add
		- · · · · · · · · · · · · · · · · · · ·	☐ Remove
			Change
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ective date, i	f other than the da	te of filing:			(optic	onal) filing.) Pursuant to 605.
i effective date i te: If the date	isted, the date must be inserted in this block	specific and cannot does not meet the	ot be prior to da ne applicable	te of filing or more statutory filing re	than 90 days after quirements, this	filing.) Pursuant to 605. date will not be liste
	tive date on the Depa			, ,	'	
record spec	ifies a delayed e	ffective date,	but not an	effective time	e, at 12:01 a	.m. on the earlie
he 90th da	y after the record	d is filed.				
November	. 15	20	19			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00