L200000 27547

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)	_
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT M	1AIL
Certified Copies Certificates of Status	(Business Entity Name)	
	(Document Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates of Status	
	Special Instructions to Filing Officer:	_

Office Use Only



400344862544

05/26/20--01013--023 **25.00

2020:...7 25 PM 2: 13

Amend ch 8

JUN 1 7 YOZU I ALEXITTON

COVER LETTER

TO: Registration Se Division of Cor		
SUBJECT: <u>Ea</u>	rthly Matters Enterpr Name of Limited Liability (iscs LLC
The enclosed Articles of	Amendment and fee(s) are submitted for file	ng.
Please return all correspo	ondence concerning this matter to the follow	ng:
	Kathryn A.	<u>Satko</u> f Person
	Firm/C	ompany
	P.O. Box 423	}
	Add	ress
	Crystal Beach	ress FL 34681 and Zip Code VS F1@ amail. Com uture annual report notification)
	E-mail address: (19 be used for f	vs Alegmail. Com
For further information co	oncerning this matter, please call:	,
Kathryn S	Yutko at (7) Person Are	204) 849 6420 Daytime Telephone Number
Enclosed is a check for th	e following amount:	
25525.00 Filing Fee	Certificate of Status Certific	Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

<u>Earthly Matters Ent</u>	terprises LLC	100 m
(Name of the Limited Liability Compa (A Florida Limited l	iny as it now appears on our records.) Liability Company)	
Farthly Matters End (Name of the Limited Liability Company (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company Florida document number <u>L200027547</u> . This amendment is submitted to amend the following:	were filed on $1/21/2$ p.20	and assigned
Florida document number <u>L200003</u> 7547.		· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the following:		10 /0 /0 /0 /0 /0 /0 /0 /0 /0 /0 /0 /0 /0
A. If amending name, enter the new name of the limited liab	ility company here:	
Coastal Matters Painting The new name must be distinguishable and contain the words "Limited liabil	Home Improvement ity Company," the designation "LLC" or the	LLC abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	111 Lorraine St Crystal Beach, FL	34681
Enter new mailing address, if applicable:	Pa Riv 423	
(Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 423 Crystal Beach, FL	34681
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code
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
			□Remove
			☐Change
		 	□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
	•		□Change
			□Add
			□Remove
			□ Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
-	
-	
-	
	live date, if other than the date of filing:
recor d is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	May 19 2020
	Signature of a member-or authorized representative of a member
	Glenn Sutko Typed or printed name of signee