

L200000 35239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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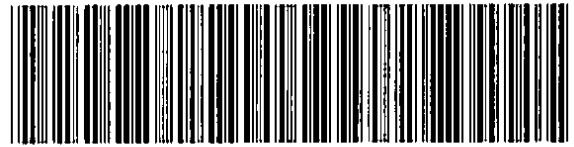
(Business Entity Name)

(Document Number)

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20 FEB 21 AM 11:22
Clerk of Court
Clerk of Court

MAR 13 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: First coast tax and credit Advisers LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dazaryn Noel
Name of Person

First Coast tax and credit Advisers LLC
Firm/Company

890 Edgewood Avenue North
Address

Jacksonville Florida 32254
City/State and Zip Code

danielle@firstcoasttaxandcredit.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dazaryn Noel at (904) 440-9640
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 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**

First Coast Tax and Credit Advisors 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 January 29 2020 and assigned Florida document number L20000035239.

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Maurice Walters Jr	7871 Morse Avenue	<input type="checkbox"/> Add
		Jax FL 32244	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zaniya Walters	7871 Morse Avenue	<input type="checkbox"/> Add
		Jax FL 32244	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Heaven Walters	7871 Morse Avenue	<input type="checkbox"/> Add
		Jacksonville FL 32244	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Honesty Walters	7871 Morse Avenue	<input type="checkbox"/> Add
		Jacksonville FL 32244	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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STATION 141
AIR 101000

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20 FEB 21 AM 11:22
ST. LOUIS, MO
U.S. DISTRICT COURT
SOUTHERD DISTRICT

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 17, 2020

Japanese Hotel
(Signature of a member or authorized representative of a member)

Dorothy Noel
Typed or printed name of signee