

L200000 54268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

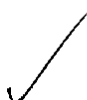
(Business Entity Name)

(Document Number)

Certified Copies

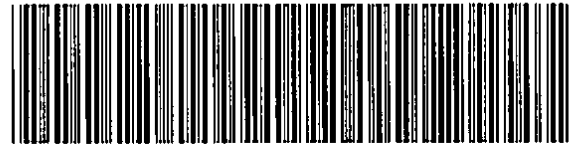


Certificates of Status



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2020 APR -1 PM 6:14

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COASTAL LIVING CONSTRUCTION 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:

Robert Christopher
Name of Person

COASTAL LIVING CONSTRUCTION LLC.
Firm/Company

94120 FIDDLER WALK LN
Address

FERNANDINA Beach, FL 32034
City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Christopher at (904) 239-8043
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing 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:
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

COASTAL LIVING CONSTRUCTION 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 February 17, 2020 and assigned Florida document number L20000054268

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)

94120 FIDDLERS LAIR LN
FERNANDINA BEACH, FL 32034

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

94120 FIDDLERS WALK LN
FERNANDINA BEACH, FL 32034

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:

94120 FIDDLERS WALK LN

Enter Florida street address

FERNANDINA BEACH
City

Florida 32034
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>
<u>AL</u> AMBR	<u>ELVIS BESSANO</u>	34181 94120 FIDDLERS LAK LN	<input type="checkbox"/> Add
		FERNANDINA BEACH FL 32034	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>AMBR</u>	<u>ROBERTA CHRISTOPHER</u>	94120 FIDDLERS LAK LN	<input checked="" type="checkbox"/> Add
		FERNANDINA BEACH FL. 32034	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>SAMANTHA VALLISH</u>	94120 FIDDLERS LAK LN	<input checked="" type="checkbox"/> Add
		FERNANDINA BEACH FL. 32034	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

(1) ELVIS BRISENO ~~REMOVED FROM LLC.~~
~~CHANGED TO MANAGER~~

(2) Roberta Christopher ~~change~~ ^{PART} ADDED ^{ADDITIONAL} AS ~~REG~~ AMBR.

(3) SAMANTHA VALLISH ADDED AS MANAGER

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record 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 record is filed.

Dated MARCH 30, 2020.

R. Christopher

Signature of a member or authorized representative of a member

Roberta Christopher
Typed or printed name of signee