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12/08/23--01015--008 \*\*25.00

## **COVER LETTER**

то:				
		OFFEE PALM COAST "LLC"		
SUBJEC	Registration Section Division of Corporations  OCTANE/COFFEE PALM COAST "LLC"  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  The return all correspondence concerning this matter to the following:  Aleggen of the following:  Firm/Company  Shish of hah for Address  Polyn Day Hard of Person  Firm/Company  Shish of hah for Address  Polyn Day Hard of Person  Firm/Company  Shish of hah for City/State and Zip Code  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  ESSANDRA HEFFERN  Name of Person  1 386  Name of Person  Name of Person  Societing Fee  1 \$30.00 Filing Fee  1 \$60.00 Filing Fee  1 \$60.00 Filing Fee			
The encl	osed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please re	eturn all correspon	dence concerning this matter to	o the following:	
		Alescandr	Name of Person	
			Firm/Company	
		& E	ishop Lane	
		Palm. Coa	City/State and Zip Code	7
		E-mail address: (to	o be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please ca	II:	
ALESS	ANDRA HEFFEI	RN		
	Name of	Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	e following amount:		
≣ \$25	5.00 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 S Division of C	Section orporations	Street Address: Registration Sec Division of Cor The Centre of T	porations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our record Liability Company)	<u>(s.)</u>
y were filed on 07/28/2020Q	and assigned
bility company here:	
oility Company," the designation "LLC	" or the abbreviation "L.L.C."
address on our records, enter	the name of the new registe
Enter Florida street addres	SS
, F)	orida
City	Zip Code
	bility company here:  bility Company," the designation "LLC  address on our records, enter  Enter Florida street address, FI

## 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
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			□Remove
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ited	W	CALAN	Met Signature o	(4-2-1) of a memory	or authorized	representativ	ve of a memb	er	<u> </u>	

Filing Fee: \$25.00