

L20000227130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

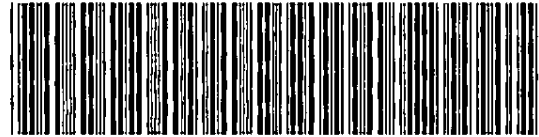
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600361607986

03/24/21--01009--006 **25.00

FILED

2021 MAR 24 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FL

APR 08 2021

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gray Squared 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:

Michelle Gray

Name of Person

Suncoast BG LLC

Firm/Company

8320 245th St E

Address

Myakka City, FL 34251

City/State and Zip Code

graylmeg@gmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

2021 MAR 24 PM 2:06

FILED

For further information concerning this matter, please call:

Michelle Gray

941

545-3997

at ()

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**

Gray Squared 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 7/30/2020

Florida document number L20000227130

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Suncoast BG LLC

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)

. 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

Now 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

FILED
2021 MAR 24 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FL

Scenario	Initial State	Final State	Operations
Scenario 1	Initial State	Final State	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Scenario 2	Initial State	Final State	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Scenario 3	Initial State	Final State	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Scenario 4	Initial State	Final State	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Scenario 5	Initial State	Final State	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

[illegible]

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 March 21, 2021

Filing Fee: \$25.00