

To:

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2024-05-22 11:48:03 UTC-14

18506176383

From: ZenBusiness User

21/5/24, 18:44

Division of Corporations

1124000182537 3

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000330724

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000182537 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : I20230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

SECRETARY OF STATE
JAIL MASSIE, FLORIDA

2024 MAY 22 PM 12:25

FILED

RECEIVED

2024 MAY 22 AM 9:04

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
COASTAL PREMIER SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

MAY 22 2024

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Corporate Filing Menu

Help

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18506176383

From: ZenBusiness User

COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: Coastal Premier Services 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:

Allison Menzon

Name of Person

ZenBusiness INC

Firm/Company

336 E. College Ave Suite 301

Address

Tallahassee, FL 32301

City/State and Zip Code

fulfillment@zenbusiness.com

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

FILED
2024 MAY 22 PM 12: 25
CLERK OF THE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

c/o ZenBusiness INC

844 493-6249
at ()

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

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To:

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18506176383

From: ZenBusiness User

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

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Coastal Premier Services 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 2020-10-19 and assigned
Florida document number L20000330724.

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:

2711 Hosanna Trail Panama City, FL 32405

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

2711 Hosanna Trail Panama City, FL 32405

(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

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From: ZenBusiness User

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>
AMBR	BOSLER, MATTHEW W	2711 Hosanna Trail Panama City, FL 32405	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	HOBBS BOSLER, CHELSEA BRO	2711 Hosanna Trail Panama City, FL 32405	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 MAY 22 PM 12:25
STATE OF FLORIDA
CLERK OF SUPERIOR COURT
JAS. J. HARRIS, CLERK

FILED

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

7.
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m
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2024 MAY 22 PM 12:25

OFFICE OF THE
SHERIFF

F. 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 05/21 2024

/s/ Chelsea Brooke Hobbs Bosler

Signature of a member or authorized representative of a member

Chelsea Brooke Hobbs Bosler, Member

Typed or printed name of signee