LZ0000373645

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
	☐ WAIT	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	:
		4/27/21 TM

Office Use Only



300361062323 03/05/21--01014--002 **25.00

21 MAR -5 PH 2: 56

. COVER LETTER

TO:

TO: Registration S Division of Co			
	t distributors LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Juan C Ramirez		
		Name of Person	
		Firm/Company	
	3111 coral springs dr #120)	
		Address	
	Coral springs, florida 3306	55	
	Jucara0327@icloud.com	City/State and Zip Code	
	•	to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
Juan C Ramirez		954 200-5943	
Name	of Person		e Telephone Number
Enclosed is a check for	the following amount:		
3 \$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 Addre		Street Address:	ation
Registration Division of (Registration Sec Division of Cor	
P.O. Box 633		The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810 32303

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Gold coast distributors LLC

21 MAR -5 PA 2:56

(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 Florida document number L20000373665	y were filed on 11/30	0/2020	_ and assigned
Piona document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company her	e:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	 		<u>. </u>
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 rec	ords, <u>enter the name o</u>	f the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
	· <u>-</u>		
New Registered Office Address:	Enter Florid	a street address	
		Florido	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M	anager uthorized Member	21 MAR -5 PH 2: 5 3111 coral springs dr #120, coral springs, fl 33065	 11:5 11:50-
<u>Title</u>	<u>Name</u>	Address PH 2: 5	Type of Action
AMBR	Claudia L Rivera	3111 coral springs dr #120, coral springs, fl 33065	
			□Remove
			□Change
		·	🖸 Add
			□Remove
			□Change
		·	□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			⊡Remove
			Change

	ONAL Sheets, if necessary) (15 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16
	21 MAR -5 PP 2:56
·	
•	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or magnetic that inserted in this block does not meet the applicable statutory filing ocument's effective date on the Department of State's records.	(optional) nore than 90 days after filing.) Pursuant to 605.0207 ng requirements, this date will not be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. I is filed.	on the earlier of: (b) The 90th day after the
ated February 26th 2021	
Lake Lake	
Signature of a member of authorized representative	e of a member