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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 : (941)907-3999 Phone

: (941)840-5559 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COCONUT BEACH RESORT, LLC

Certificate of Status	0
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Page Count	04
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## **COVER LETTER**

Division of Cor			
COCONUT	BEACH RESORT, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Sean Kelly		
	<del> </del>	Name of Person	<del></del>
	Najmy Thompson, P.L.		
		Firm/Company	<del>_</del>
	1401 8th Ave W		
		Address	_
	Bradenton, FL 34205		T 22
		City/State and Zip Code	- ACC 333
	Cara@beachtobayliving.com	n to be used for future annual report notification)	7021 JUL 1707 1 JUL
			1 1 2 2 2 2
For further information c	oncerning this matter, please c		2. 20 11
Sean Keily		941 7482216 at ()	nber Siri Si
Name o	f Person	Area Code Daytime Telephone Nur	nber Siri Ci
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	0 Filing Fec, ficate of Status & fied Copy sonal copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

<del></del>	City	Zip Code
		Fiorida
New Registered Office Address:	Enter Florida street ad	dress
<del></del>		
Name of New Registered Agent:		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>en</u>	ter the name of the new registered
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L	.LC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited	l liability company here:	
This amendment is submitted to amend the following:		
Florida document number 1.20000381807		
The Articles of Organization for this Limited Liability Comp	pany were filed on 12/07/2020	and assigned
	ompany as it now appears on our rec nited Liability Company)	ords.)
COCONUT BEACH RESORT, LLC		

## 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>	Name	Address	Type of Action
MGR	Roman Eckert	1401 8th Ave W	
		Bradenton, FL 34205	□Remove
			☐ Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
			CIAdd
			[]Remove
		••••	□Change
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			□ Change

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an effective date is listed, the date lote: If the date inscreed in this	s block does not	meet the applic	able statutory	filing requireme	ents, this dat	e will not be listed
ocument's effective date on the	: Department of	State's records				
record specifies a delayed effe	ctive date, but no	ot an effective t	ime, at 12:01	a.m. on the earli	erof: (b) T	he 90th day after t
i is filed.						
July 1		2021				
Pated July 1 Juny . N		- 1	<del></del> ,			
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Llee at V	$\omega$					

Filing Fee: \$25.00