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2/25/21

COVER LETTER

TO: Registration Se Division of Cor					
SURFECT: Coastline	e Real Estate & Proper	ty Management Group	LLC		
SUBJECT:	Name of Lim	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
		Buddy Burgess			
	_	Name of Person			
	Coastline Real Esta	te & Property Manage	ement Group LLC		
		Firm/Company			
	21 Brook Dr				
		Address			
	San	ta Rosa Beach, FL 32	459		
		City/State and Zip Code			
		idyneal31@gmail.com to be used for future annual repo			
For further information co	oncerning this matter, please c	•			
Bryan Kiefer		at (850)	830-2843		
Name o	f Person	Area Code 1	Daytime Telephone Number		
Enclosed is a check for th	ne following amount:				
☑ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration S		<u>Street Addr</u> Registratic			
Registration Section Division of Corporations		Division o	Division of Corporations		
P.O. Box 632 Tallahassee, F			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
			e, FL 32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED

COASTLINE REAL ESTATE & PROPERTY MANAGEMENT GROUP LLC

2021 FEB 25 PM 2: 06

(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appear colour records (Limited Liability Company) TALLAHASSE	STATE
The Articles of Organization for this Limited Liability Co		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the</u>	name of the new reg
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	

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 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
MGR	Bryan Kiefer, Esq.	327 South County Hwy 393	
		Santa Rosa Beach, FL 32459	□Remove
			□Change
			🗆 🗆 🗆
			□Remove
			□ Change
	,		□Add
			□Remove
			□Change
			🗀 Add
		Santa Rosa Beach, FL 32459	□Remove
			□Change
			🗆 Add
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			□Change

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[an ell	ve date, if other than the date of filing: 02/01/2021 (optional) series 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 60: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ent's effective date on the Department of State's records.	5.0207 (led as tl
recor d is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day affe ed.	r the
Yarar 1	January 25th 2021	
micu ,	January 25th Significate of a member of anthorized representative of a member	

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