121000010176

(Requestor's Name)
(Address)
(Madless)
(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



300365012003

04/29/21--01017--036 **25.00



[10/2]

COVER LETTER

Division of Corp				
SUBJECT:	COACH Name of Line	Grimes, LL	<u>C</u>	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Jorda	Name of Person	··· ···	
		Firm/Company	200	
		<u> Address</u>		#
	Lite	hia, F2 33:	547 PH (ţ
	No to E-mail address: (City/State and Zip Code V.Ch. NOTAY Quille to be used for future applical report notions.	gok, Com E	~ -
For further information co	oncerning this matter, please ca			
Jordan	Grimes	at (<u>3/7</u>) <u>4/3</u>	9388 ne Telephone Number	
Name of	reison	Area Code Dayun	ie reseptione Nation	
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 (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration Section Division of Corporations		Registration Se Division of Cor		
P.O. Box 6327		The Centre of Tallahassee		
Tallabaccoa FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Loach Gol	mes LL		
(<u>Name of the Limited Liability Co</u> r (A Florida Limi	mpany as it now appears of ted Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L \ 10000 10 17 (e</u> .	any were filed on	ec 31 Lo20 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I			
The new name must be distinguishable and contain the words "Limited L	iability Company," the desig	nation "L.L.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		2ú2	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	AP AP	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		29 PN 3:08	
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our reco	rds, <u>enter the name of the new registere</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	 	, Florida	
	Ciŵ.	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

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 = MANBR = A	anager N/D athorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
		A	□ Remove
			PP Change
	· · · · · · · · · · · · · · · · · · ·		
		-	: = ≦1
			□ Change
			□ Add
			□Remove
			□Change
			Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) e-mail Communication E. 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. Signature of a member or authorized representative of a member