## L21000037014

(	Requestor's Name)	
(	Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(	Document Number)	
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## **COVER LETTER**

TO: Registration Section of Corp			
SUBJECT: ACS	EMELALD CO Name of Limi	DAST DIVISION ted Liability Company	,uc
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	NicHOLAS	GEOGE Name of Person	
	ACS EMBLA	COAST Dissi ( Firm/Company	n,ll.
	Po Box 14	Address	<del></del>
	TALLA HASS	City/State and Zip Code  EUNGE 191 PGW o be used for future annual report notific	317
	NICHOUSE E-mail address: (to	EUNGE 1971 PGW o be used for future annual report notific	MAIL COM.
For further information con	ncerning this matter, please ca	N:	
MICHOURS	GEORGE	at (850 321-	9129
Name of I	Person	Area Code Daytime 1	Felephone 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ACS EMEMBED COAST DIVISION 2022 MAY C.5. AM 10: 21

(Name of the Limited Liability Company as it now appears on our tecords.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on	2/4/21	and assigned
Florida document number <u>L21000637014</u> .		. '1	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company ho	e <u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the d	esignation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		······································	
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	·-· · · - · · - · · - · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		····· ··· ··· ··· ··· ··· ··· ··· ···	
Enter new mailing address, if applicable:			· <del></del>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our r	ecords, <u>enter the</u>	name of the new registered
agent and of the new registered office address here.			
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	Enter Flor	rida street address	
	Citv	, Floric	ia Zip Code
New Registered Agent's Signature, if changing Registered Agent:	C.i.y		zap coac

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
AMBR	EDDIE KIUTZ	2187 MAYO RD	□ Add
		2187 MAYO RD GLAND RIDGE, FL 324	<u>√2</u> ¤Remove
			□Change
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ective date, if other	than the date of fi	iling: 5\5	to date of filing or mo	re than 90 days after fi	al) ing.) Pursuant to 605.0207
te: If the date inserte	d in this block does n	not meet the applica	able statutory filing	requirements, this o	ate will not be listed as
ument's effective dat	e on the Department	of state's records.			
cord specifies a delay	ed effective date, but	not an effective ti	me, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
s filed.					
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	Signature of	of a member of abdic	orized representative of	of a member	