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COVER LETTER

Registration Section Division of Corporations

TO:

SOUTHER SUBJECT:	N SEA BREEZE LLC.			
SUBJECT: <u>. </u>	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	NICHOLAS ELLIOTT			
		Name of Person		
	SOUTHERN SEA BREEZ	ME LLC.		
		Firm/Company		
	8532 S US HWY I			
		Address	, 	
	PORT ST LUCIE, FL 349	52		
		City/State and Zip Code	 	
	NE5305000@GMAIL.COM			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
NICHOLAS ELLIOTT		772 530-5000 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	S30.00 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		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Co	Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, I	TL 32314	2415 N. Monro	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHERN SEA BREEZE LLC			FILE R 29
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on (Limited Liability Company)	our records.)	9 PM
The Articles of Organization for this Limited Liability C Florida document number $\frac{L21000057105}{L21000057105}$	ompany were filed on 2/1/21		PH Indiansigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ited liability company here:		
COASTAL FLOORS & MORE LLC.			
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	ation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:			
<u>(Principal office address MUST BE A STREET ADDR</u>	RESS)	· ·	
		-	
•	- · · - ·		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
D. If any older the second second second second			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	1 office address on our recor	ds, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida si	treet address	_
		, Florida	
	City		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 on removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	PAUL ELLIOTT	8532 S US HWY I	
		PORT ST LUCIE, FL 34952	■Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove

	
	
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of	(optional)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tiling or more than 90 days after filing.) Pursuant to 605.0207 (tory filing requirements, this date will not be listed as t
e record specifies a delayed effective date, but not an effective time, at 12 rd is filed.	:01 a.m. on the earlier of: (b) The 90th day after the
\mathcal{A}	202
Dated	2 AP
Nullalor Elevotti	2022 APR 29 I
Signature of a member or authorized repr	esentative of a member
NICHOLAS ELLIOTT, MBR.	DRI II

Typed or printed name of signee