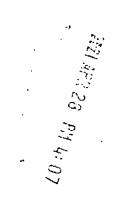
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COVER LETTER

envision of Cor	porations		
SUBJECT:	FL Coastal	Homes I.LC.	
SUBJECT;	Name of Lin	月でルモミ LLC nited 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:	
	su	Name of Person	
		Name of Person	
	FLC	castal trames LLC	
		Firm/Company	
	821	High point DR.	
e		Orthoress	
	Par	City/State and Zip Code	197
	my-11 coas	to be used for future annual report noti	ick.com
For further information c	oncerning this matter, please c	·	
i		7	_
Julie DeMeth		at (<u>584) - 316-</u> Area Code - Daytim	キョンの e Telenhone Number
			- · · · · · · · · · · · · · · · · · · ·
Enclosed is a check for the	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)
œ			

Mailing Address: Street Address: Paging Spation Paging Street Address: Paging Street Addres

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

TO:

Registration Section

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

	**Z/	1000 28 p
(Name of the Limited Liabil	I Homes LLC. hty Company as it now appears on o	our records.)
(A Florid	la Limited Liability Company)	
The Articles of Organization for this Limited Liability C		and assigned
Florida document number <u>Lalcooogoa10</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
FL Coastal Realty S The new name must be distinguishable and contain the words "Lin	Bervices LLC	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designa	ation "LEC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	ed office address on our record	ls, enter the name of the new registere
agent and/or the new registered office address here:		
<i>9</i>		
Name of New Registered Agent:		
New Registered Office Address:		
rest registered Office Address.	Enter Florida su	reet address
		Florida
	City	, Florida

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 = g Manager AMBR = Authorized Member

Title MGR	Name Julie DeMuth	Address Classica Pr. 4:07 821 High point DR.	Type of Action Already Maybed House. XAdd
		Port Drange, FL 3010	
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			🗆 Add
			□Remove
g			☐ Change
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ective date, if other than the date of filing: i effective date is listed, the date must be specific and cannot be personal to the date inserted in this block does not meet the apprument's effective date on the Department of State's reco	orior to date of filing or more than 90 days after filing.) Pursuant to 605.02 plicable statutory filing requirements, this date will not be listed a
cord specifies a delayed effective date, but not an effective filed.	ve time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ed <u>4-22-21</u>	
Juli Do Marth Signature of a member or a	