## 121000323307

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## **COVER LETTER**

TO: Registration Se Division of Cor			
	WATER PROPERTY LLC		
SUBJECT:	Name of Limi	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
	endence concerning this matter		
	GEORGE FREUND ESQ		
	·	Name of Person	
	ELLIS LAW GROUP		
	-	Firm/Company	<u> </u>
	4755 TECHNOLOGY WA	XY SUITE 205	
		Address	
	BOCA RATON FL 33431		
		City/State and Zip Code	
	GEORGE@ELLIS-LAW.C		
		to be used for future annual report noti	neation)
For further information of	concerning this matter, please co	all:	
GEORGE FREUND		561 910- 7500 at ( )	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ction
Division of C	•	Division of Cor	-
P.O. Box 632 Tallahassee		The Centre of T	ananassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/ 773.23 PH L: 17 2118 BLUE WATER PROPERTY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{7/15/2021}{1}$ and assigned Florida document number L21000323307 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CORAL BLUE WATER PROPERTY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4895 Exeter Estate Lane Enter new principal offices address, if applicable: Lake Worth, Florida 33449 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 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 Changing Registered Agent, Signature of New Registered Agent

, Florida \_\_\_

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
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Effect	ive date, if oth	er than the da	te of filing	:		(	optional)	
II an ett Note:	ective date is listed. If the date inser	I, the date must b	specific and	cannot be prior t	to date of filing or	more than 90 day	after filing.) Pursu	ant to 605.0207
docum	ent's effective d	ate on the Depa	riment of St	ate's records.	ible statutory fil	ing requirement	s after tiling.) Pursu s, this date will no	ot be listed as t
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	AUGUST 9			2021				
Dated .		<del></del>	,	2021	<u> </u>			
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Typed or printed name of signee