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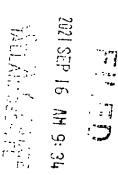
(Requestor	's Name)
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TO:		tration Sect on of Corpo		·				
ounir		Coastal Mini-	-Donuts LLC					
SUBJE	CI: _		Name of Limi	ited Liability Company				
The enc	closed A	Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please r	eturn a	ll correspond	dence concerning this matter	to the following:				
			Kristian Tucker					
				Name of Person				
				Firm/Company				
			1449 W 9 Mile Rd, #17					
				Address				
			Pensacola, FL 32534					
				City/State and Zip Code				
			ktmk36@yahoo.com					
			t:-mail address: (to be used for future annual report notific	anon)	(7)	20	
For fur	ther info	ormation cor	ncerning this matter, please co	all:		22 C	S	٠.5
Phillip	A. Pug	h		at () 432-9818			2021 SEP 11	
		Name of	Person	Area Code Daytime	l'elephone Number		6 AM 9:	, 5 - Max
Enclose	ed is a c	heck for the	following amount:				ယ	₹
≡ \$2.	5.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status	# -	

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coastal Mini-Donuts LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 7/16/21	and assigned
Florida document number L21000325851		· ·
This amendment is submitted to amend the following:		
Florida document number L21000325851 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 1449 W 9 Mile Rd. #17		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	1449 W 9 Mile Rd. #17	
(Principal office address MUST BE A STREET ADDRESS)	Pensacola, FL 32534	
	12909 6TH ST	
		_
Maning aggress MAT BE A FOST OFFICE BOAT		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the nam	e of the new registere
Name of New Registered Agent:		12 SE 17
New Registered Office Address:		on / 17
	Enter Florida street address	
	, Florida	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.

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H 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>	<u>Address</u>	Type of Action
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			□Remove
			Change
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m effective o ote: If the	date is listed, the da date inserted in t	n the date of filite must be specific a his block does not the Department of	nd cannot be p t meet the ap	orior to date of plicable stati	filing or more	than 90 days at	otional) fter filing.) I	ursuant		

Filing Fee: \$25.00