Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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, and the same of	NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
то:	Division of Corporations Fax Number : (850)617-6383
From:	Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC Account Number : I20070000020 Phone : (813)435-3176
1	Fax Number : (813)333-6358
Enter anı	the email address for this business entity to be used for future nual report mailings. Enter only one email address please.
Em	ail Address: N CO N () 11071 11071
T.	LC AMND/RESTATE/CORRECT OR M/MG RESIGN GOLD COAST BREEZE, LLC
	ASLINDE / '

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF	ŗ	022 750 750
GOLD COAST BREEZE, LLC	Manager on our records	
(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)	AS IS
		S C and signed
The Articles of Organization for this Limited Liability Company	were filed on	THIS I
Florida document number L21000353052		F. 2
		ш; о
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
		- _
The new name must be distinguishable and contain the words 'Limited Liabili	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
	1660 Southwest 14th Drive	
Enter new principal offices address, if applicable:	1000 0044411	
(Principal office address MUST BE A STREET ADDRESS)	71 13 22404	
	Boca Raton, Florida 33486	
		•
Enter new malling address, if applicable:	1660 Southwest 14th Drive	
(Malling address MAY BE A POST OFFICE BOX)	Boca Raton, Florida 33486	
B. If amending the registered agent and/or registered office	address on our records, enter the	e name of the new registered
B. If amending the registered agent and/or registered office address here:		
agent and of the new registered		
The state of the s		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	jda Zip Code
•	City	
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>	y (27 27 .
agant and ag	ree to act in this capacity. I furt	her agree to comply with the

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

To: 18506176383

From: 8139688732

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

Title	Name	<u>Address</u>	Type of Action
MGR	nickolas spradlin	18801 N. DALE MABRY HWY	□Add
<u> </u>		STE 119	■Remove
		LUTZ, FLORIDA 33548	[] Change
AMBR	Kristin Boyum Jennings	1660 Southwest 14th Drive	■Add
			□Remove
		Boca Raton, Florida 33486	
			□Add
		·	□Remove
			Change
•			
	· ·		□Remove
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			Cladd
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			(] Change
			Cl Add -
			□Remove

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Effective date, if other than	the date of filing:	(optional) of filing or more than 90 days after filing.) Pursuant to 605.03 tatutory filing requirements, this date will not be listed
Nivers it the deteinger(ex) it (my picky fither har men are apparent.	tatutory filing requirements, this date will not be listed
document's effective date on t	the Department of State's records.	
e record specifies a delayed ef	fective date, but not an effective time, as	12:01 a.m. on the earlier of: (b) The 90th day after t
rd is filed.		
15/15	2022	
Dated	, 2022	
71	Signature of a member or authorized	
c//+		