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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to I	Filing Officer:	





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COVER LETTER

Tallahassee, FL 32314

TO:

	Registration Se Division of Cor					
A		CONCEPTS OF NAPLES LI	MITED LIABILITY COMPANY	•		
SUBJEC"	I: <u>. </u>					
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please reti	urn all correspo	ondence concerning this matter	to the following:			
		LISA ZAHORIAN				
		-	Name of Person			
	TAX & FINANCIAL STRATEGISTS LLC					
	Firm/Company					
		28089 VANDERBILT DR	., SUITE 201			
			Address			
		BONITA SPRINGS, FL 3-	4134			
			City/State and Zip Code			
		LISA@WONDERTAX.CO	M to be used for future annual report notif	fication)		
For furthe	r information c	oncerning this matter, please ca		,		
LISA ZA	HORIAN		239 405-8395			
Name of Person		d Person	Area Code Daytime	e Telephone Number		
Enclosed:	is a check for th	he following amount:				
■ \$25.0	0 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)		
	Mailing Addres Registration S		Street Address: Registration Sec	tion		
Division of Corporations			Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COASTAL CONCEPTS OF NAPLES LIMITED LIABILITY COMPANY

(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 I	iability Company w	ere filed on AUGUS	Г 5, 2021	and assigned
Florida document number L21000353424				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liabilit	ty company here:		
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designat	ion "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
	-			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	- * <i>BOX</i>)			
B. If amending the registered agent and/or agent and/or the new registered office address.		dress on our record	s, <u>enter the name of</u>	the new registered
Name of New Registered Agent:	TAX & FINANCI	IAL STRATEGISTS I	LLC	<u> </u>
New Registered Office Address:	28089 VANDERBILT DR., SUITE 201 Enter Florida street address BONITA SPRINGS , Florida 34134 Zip C			()
	Enter Florida street address		. 2	
	BONITA SPRING	3S	, Florida <u>34134</u>	
No. 10 Section of Association (Colorador)	Danistana d Amana.	City	Z	ip Code
New Registered Agent's Signature, if changing				
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete po istered agent as pro- registered office ac	erformance of my d ovided for in Chapt	uties, and I am fami er 605, F.S. Or, if th	liar with and is document is

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
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			☐Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed. Dated __ Signature of a member or authorized representative of a member JOHN TSISKAKIS

1.

Filing Fee: \$25.00

Typed or printed name of signee