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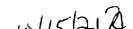
(Requestor's Name)
(Address)
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COVER LETTER

Division of Corpo	rations		
SUBJECT: Kasey	on the Coas	5† LLC ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Kasey Dow	Name of Person	
		Firm/Company	<u> </u>
	1672 Saint	F Lawrence Dr. Address	
	niceville, F	City/State and Zip Code	
	Kaseyontheco	City/State and Zip Code ast @ amml. com to be used for fulfire annual report noti	lication)
For further information conc	cerning this matter, please ca		
KASCY Harvel	SOM	at (<u>605</u>) <u>209-5</u> Area Code Daytim	350 to Telephone Number
Enclosed is a check for the f	ollowing amount: \$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)

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Kasey on t</u>	he Coast LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Co		and assigned	
Florida document number L 21000 367 873	_		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
Kasey Downer Harrelson, The new name must be distinguishable and contain the words "Limit	LLC		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	ESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		. 53	
		<u> </u>	
		- 	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	ds, enter the name of the new registere	
agent and of the new registered office address nere.		77.	
Maria CNI Di Santa		3. 27	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Z11.	, Florida Zip Code	
	City	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.

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 N	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
		~	
			□Remove
			Change
			□Remove
			□Change
			□ Add
			□ Rелюче
			□ Change
			□Remove
			□Change
	 -		□Add
			□Remove
			Change

Effective date, if other than the date of filing: 8 2021 (optional) Far 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 State: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as focument's effective date on the Department of State's records. The other provides a delayed effective date, but not an effective time, at 12,01 a.m. on the enther of: (b) The 90th day after the dis filed. Signature of a member or authorized representative of a member Kasey Downer Harrelson Typed or printed name of signee.						
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	_Kas	en Downer	Harrelson			