

L220001929513 **H220001929513**
 Florida Department of State
 Division of Corporations
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To:
 Division of Corporations
 Fax Number : (850)617-6193

From:
 Account Name : HAND ARENDALL HARRISON SALE LLC
 Account Number : 120190000128
 Phone : (850)769-3434
 Fax Number : (850)769-6121

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jcampfield@handfirm.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 CASTAWAY SHORE FURNITURE, LLC**

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 2022 JUN -2 AM 9:18

JUN - 3 2022

K. Brumbley

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COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: CASTAWAY SHORE FURNITURE, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Sterrett

Name of Person

CASTAWAY SHORE FURNITURE, LLC

Firm/Company

14301 PANAMA CITY BEACH PARKWAY

Address

PANAMA CITY BEACH, FL 32413

City/State and Zip Code

sk8crpc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Sterrett

850 624-5010

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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**

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CASTAWAY SHORE FURNITURE, 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 05/12/2022 and assigned
Florida document number L22000224302.

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 "L.L.C."

Enter new principal offices address, if applicable:

(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

Florida

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 Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	BRIAN STERRETT	14301 PANAMA CITY BEACH PARKWAY	<input type="checkbox"/> Add
		PANAMA CITY BEACH, FL 32413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BRIAN STERRETT	14301 PANAMA CITY BEACH PARKWAY	<input checked="" type="checkbox"/> Add
		PANAMA CITY BEACH, FL 32413	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	ALAN WERNER	14301 PANAMA CITY BEACH PARKWAY	<input checked="" type="checkbox"/> Add
		PANAMA CITY BEACH, FL 32413	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

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 JUNE 1, 2022

Signature of a member or authorized representative of a member

ALAN WERNER

Typed or printed name of signee