

L22000256889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

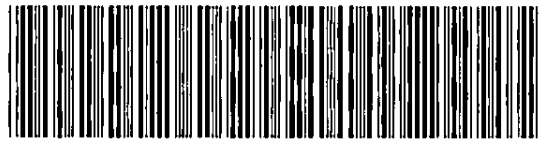
(Document Number)

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2024 JUL 4 PM 3:18

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** COASTAL WOUND CARE, 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:

BRADLEY YOUNG

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2841 JACK NICKLAUS WAY

\_\_\_\_\_  
Address

SHALIMAR, FL 32579

\_\_\_\_\_  
City/State and Zip Code

coastalwoundcareFL.com

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

For further information concerning this matter, please call:

BRADLEY YOUNG

850

613-4281

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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

2024.05.24 PM 3:56

**ARTICLES OF AMENDMENT TO  
ARTICLES OF ORGANIZATION  
OF  
COASTAL WOUND CARE LLC**

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The Articles of Organization for COASTAL WOUND CARE LLC were filed on, **June 24, 2022**, and assigned Florida Document Number **122000286889**.

This amendment is submitted to amend the following:

**AMENDMENTS**

Article IV is hereby Amended as follows:

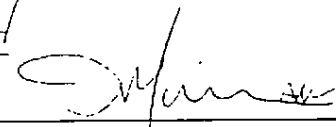
Title: AMBR  
MASON, DAVID  
775 BARLEY PORT LANE  
FORT WALTON BEACH, FL 32547

Title: AMBR  
YOUNG, BRADLEY  
2841 JACK NICKLAUS WAY  
SHALIMAR, FL 32579

Title: AMBR  
REID, CHRIS  
309 BAYSHORE DR  
NICEVILLE, FL 32578

In all other respects, the Articles of Organization shall remain as they were prior to this Amendment being adopted.

**Certification.** This document is executed in accordance with Section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.

Date: 5.22.24  
Signature:   
Printed Name: David Mason