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COVER LETTER

TO: Registration Se Division of Cor			
Beachsham SUBJECT:			
SUBJECT:		nited Liability Company	,
The coolered A a'd a . C	A. I	See Lee Lett	
	Amendment and fee(s) are sub		
riease return air correspo	ondence concerning this matter	to the following:	
	Carol Whitefield		
	4	Name of Person	
		Firm/Company	
	1410 Reynolds Street		
	-	Address	
	Key West, FL 33040		
		City/State and Zip Code	
	carolw@elitecoatingsinc.co	m (to be used for future annual report notification)	
For further information c	oncerning this matter, please c	·	
Carol Whitefield		920 606-8066	
Name o	f Person	Area Code Daytime Telephone Number	
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)	of Status & Opy
Mailing Addres Registration S		Street Address: Registration Section	
Division of C P.O. Box 632		Division of Corporations	
Tallahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beachsham, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L		were filed on August 1, 2022	and assigned
Florida document number 122000339091	··		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1410 Reynolds Street	
(Principal office address MUST BE A STREET ADDRESS)		Key West, FL 33040	
Enter new mailing address, if applicable:		1410 Reynolds Street	
(Mailing address MAY BE A POST OFFICE BOX)		Key West, FL 33040	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, enter the	name of the new register
Name of New Registered Agent:	Carol Whitefiel	d	. <u>.</u> .
New Registered Office Address:	1410 Reynolds		
		Enter Florida street address	
	Key West	, Florid	a 33040
	<u></u>	Enter Florida street address	a _. 33040 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

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>	Address	Type of Action
MGR	Carol Whitefiled	1410 Reynolds Street, Key West, FL 33040	5 Add
			□Remove
			□ Change
			□Remove
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If an effe	re date, if other than the date of filing: (optional) ctive 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 605.020
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ant's effective date on the Department of State's records.
e record rd is file	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
Dated _	Mari SWill
	Signature of a member or authorized representative of a member