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PAINTER OF CORRORATION

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
SUBJECT: <u>F</u> 18	RST COAST	PROPERTY MANAG	EMENT LLC	
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	TERREL	L NEWBERRY Name of Person		
		Name of Person		
		Firm/Company		
	11516	SAN Jose BLVI)	
		City/State and Zip Code		22 S
	0/40-20-01	City/State and Zip Code		节章
	TERREI / NI	EWREREN DO amaic.	C0.00	25
	E-mail address: (E WBERRY @ 9 maic. to be used for future annual report notif	ication)	
For further information c	oncerning this matter, please c	all:	•	22 SEP 22 AH II: 07
TERRELL A	JEWBERRY	at (<u>904)</u> 349- Area Code Daytime	8694	5
Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	S30.00 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)	ı
Mailing Addres		Street Address:		
Registration 5		Registration Sec		
Division of C P.O. Box 632	•	Division of Corp The Centre of T		

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar		
(Name of the Limited Liability Compar (A Florida Limited L	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company "the designation "LLC" or	the abbreviation "PC"
Enter new principal offices address, if applicable:		438 de 1988 de
(Principal office address MUST BE A STREET ADDRESS)		2 997 2 997
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
	 	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florid	a
	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TERRELL NEWBERRY	13688 MT. PLEASANT RD	_ #Add
		JACKSONVILLE, FL 32225	□Remove
			□Change
4 M_BR_	SHIRLRY NEWBERRY	13688 MT PLOOSANT PL	XAdd
		JACKSONVILLE, FC 32225	□Remove
			□Change
MGR	SHIRLEY NEWBERRY	13688 MT PLASMI RI	🗆 Add
		Jacksonville, FL: 32225	Remove
			□Change
			が終めが 22 基EP 22
			Remove
			— □ Changes, 1
			_ □Add _ □Add
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	ny other information, enter change(s) here: (Attach additional sheets, if necess	,.,
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If an effective date Note: If the dat	if other than the date of filing:	ing.) Pursuant to 605.020
e record specific rd is filed.	es 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	July P Muleuw Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	TERREU NEWBERRY Typed or printed name of signee	
	IERREU NIEUSERRY	

Filing Fee: \$25.00