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COVER LETTER

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TO:

Registration Section Division of Corporations

COAST EX	KOTICS LLC			
3003ECT.	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	WISAM KASHOUR			
		Name of Person		
	KASHOUR ACCOUNTIN	IG INC		
		Firm/Company		
	14606 JOHN HUMPHRE	Y DR UNIT I		
		Address		
	ORLAND PARK, IL 6046	2		
		City/State and Zip Code		
	CHICAGOMOBILETAXS	ERVICE@GMAIL.COM		
	E-mail address: (to be used for future annual report notification	on)	
For further information e	oncerning this matter, please c	all:		
WISAM		630 6701085		
Name of Person		Area Code Daytime Tele	ephone Number	
Enclosed is a check for the	ne tollowing 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)	
<u>Mailing Addres</u>	: <u>s:</u>	Street Address:		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallabassos, FL 32314			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company were filed on 07.	/26/2024 and assigned
Florida document number L24000331747	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	<u>:re</u> :
COAST LUXURY LLC	
	esignation "LLC" or the appreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited Liability Company," the d	024 S
The new name must be distinguishable and contain the words "Limited Liability Company," the d Enter new principal offices address, if applicable:	024 14
The new name must be distinguishable and contain the words "Limited Liability Company," the d Enter new principal offices address, if applicable:	124 SEP 8
The new name must be distinguishable and contain the words "Limited Liability Company," the d Enter new principal offices address, if applicable:	024 SEP 18
The new name must be distinguishable and contain the words "Limited Liability Company," the d Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	124 SEP 8
COAST LUXURY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the d 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)	124 SEP 8 PH

agent and/or the new registered office address here:

New Registered Office Address:		
Meginered Office Fidules.	Enter Florida street a	iddress
<u></u>		_, Florida
	City	Zin 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
		<u> </u>	
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			
			□Remove
			☐ Change
			□ Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 9/6/2024