

L25000256963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

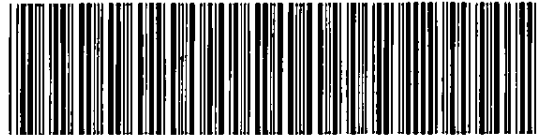
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FW
225

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coast Line Pest Management 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:

Clayton Waggoner
Name of Person

Firm/Company

5282 Cypress Ln
Address

NAPLES, FL 34113
City State and Zip Code

Coastline pest management @ gmail
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Clayton Waggoner at (239) 462-7713
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

Coastline Pest Management LLC

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Clayton Waggoner	5282 Cypress Ln Naples, FL 34113	☒ Add
			☐ Remove
			☐ Change
MGR	Tyler Mills	4035 22nd Ave SE Naples, FL 34117	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Remove
			☐ Change

SEP 17 1964
FALL 1964

(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)

Dated 7/2/25

Clayton
Signature of a member

Signature of a member or authorized representative of a member

Clayton Waggoner

Typed or printed name of signer

Filing Fee: \$25.00