#1/21/2014 18:27:20 From: To:: 85081/76383

[Division of Corporations]

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMADAS COACH LLC

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K.SALY EXAMINER

APR 2 2 2014

Electronic Filing Menu

Corporate Filing Menu

Help

	COV	EK LETTER			
	ion Section of Corporations				
SUBJECT: C	oach, LLC				
	Name of Foreig	n Limited Liability (Compan	У	
Dear Sir or Mada	ım:				
The enclosed app	olication, certificate and fee(s)	are submitted for fil	ing.		
Please return all	correspondence concerning thi	is matter to the follow	wing:		
John D. V	Vagner				
	Name of Person				
Amadas (
	Firm/Company				
1007 Obi	ci Industrial Blvd.	<u></u>			
	Address				
Suffolk, V					
	City/State and Zip Cod	C			
	gamadascoach.co				
E-mail addres	s: (to be used for future annua	I report notification)			
For further infor	mation concerning this matter	•			
John	D. Wagner	_at (757) 9	25-2	862	
1	Name of Person		aytime	Telephone Number	
STREE		MAILING ADDRESS:			
	tion Section of Corporations		Registration Section		
Clifton i		Division of Corporations P.O. Box 6327			
2661 Ex		Tallahassee, Florida 32314			
Tallahas	see, Florida 32301				
Enclosed is a ci	beck for the following amous	nt:			
\$25 Filing Fe	_	S55 Filing Fe		☐ \$60 Filing Fee, Certificate of Status & Certified Copy	
CD15064 (19/11)					

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

SECTION I (1-3 must be completed)	WILLIAM OF STATES
1. Name of limited liability Company as it appears on the records of the Florida Departmen State: Amadas Coach LLC MIH Docoo 2193	ior State of the
2. Jurisdiction of its organization: Virginia	- CS (2) (0) 24
3. Date authorized to do business in Florida: 4/1/2014	
SECTION II (4-7 complete only the applicable changes)	
4. New name of the limited liability company: (must contain "Limited Liability Company. ""L.L.C.," or	न्द्रदन्)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members ado the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C. or "LLC.")	pting
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), i that change; Add the following individual as a Manager of the LLC:	ndicate
James C. Adams	
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), daily authenticated by the official having custody of recojurisdiction under the law of which this entity is organized. Signature of the aphorized representative	rds in the
John D. Wagner	
Typed or printed name of signee	
500 B 505 66	

Filing Fee: \$25.00