

M17000001590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

FEB 27 2018

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grand Coach LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Darryl Connors

Name of Person

Grand Coach

Firm/Company

21240 Protecta Drive

Address

Elkhart, IN 46516

City/State and Zip Code

mikecompany10@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Schoeffler

Name of Person

at (574) 849-1216

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Grand Coach LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M17000001590

3. Jurisdiction of its organization: Indiana

4. Date authorized to do business in Florida: 02/21/2017

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Dolphin Motor Coach LLC

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(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 adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

Florida

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized

X

Signature of the authorized representative

Darryl Connors, President

Typed or printed name of signee

Filing Fee: \$25.00

State of Indiana
Office of the Secretary of State

Certificate of Amendment
of
GRAND COACH LLC

I, CONNIE LAWSON, Secretary of State, hereby certify that Articles of Amendment of the above Domestic Limited Liability Company have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code

The name following said transaction will be:

DOLPHIN MOTOR COACH LLC

NOW, THEREFORE, with this document I certify that said transaction will become effective
Wednesday, February 14, 2018



In Witness Whereof, I have caused to be affixed my
signature and the seal of the State of Indiana, at the City
of Indianapolis, February 14, 2018

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201701111175064 / 7834018

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>

APPROVED AND FILED
CONNIE LAWSON
INDIANA SECRETARY OF STATE
02/14/2018 11:07 AM

ARTICLES OF AMENDMENT

ARTICLE 1 - NAME AND PRINCIPAL OFFICE ADDRESS

BUSINESS ID	201701111175064
BUSINESS TYPE	Domestic Limited Liability Company
BUSINESS NAME	GRAND COACH LLC
PRINCIPAL OFFICE ADDRESS	21240 Protecta Drive, Attn: Darryl Connors, Elkhart, IN, 46516, USA
DATE AMENDMENT WAS ADOPTED	02/14/2018

EFFECTIVE DATE

EFFECTIVE DATE	02/14/2018
EFFECTIVE TIME	08:09AM

ARTICLE 1 - BUSINESS NAME CHANGE

DATE OF ADOPTION	02/14/2018
NEW BUSINESS NAME	Dolphin Motor Coach LLC



APPROVED AND FILED
CONNIE LAWSON
INDIANA SECRETARY OF STATE
02/14/2018 11:07 AM

SIGNATURE

THE MANNER OF THE ADOPTION OF THE ARTICLES OF BUSINESS AMENDMENT CONSTITUTE FULL LEGAL COMPLIANCE WITH THE PROVISIONS OF THE ACT, AND THE ARTICLES OF ORGANIZATION.

THE UNDERSIGNED MANAGER OR MEMBER OF THIS LIMITED LIABILITY COMPANY EXISTING PURSUANT TO THE PROVISIONS OF THE INDIANA BUSINESS FLEXIBILITY ACT DESIRES TO GIVE NOTICE OF ACTION EFFECTUATING BUSINESS AMENDMENT OF CERTAIN PROVISIONS OF ITS ARTICLES OF ORGANIZATION.

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY **February 14, 2018**.

SIGNATURE

Darryl Connors

TITLE

Manager

Business ID : 201701111175064

Filing No : 7834018