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(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Constal Elevator Consultant and Communication Document Number:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Auis Q. Jimenez Name of Contact Person Coastal Eterator Consultant and Communication Services, Inc. Firm/Company 7969 Nw 2nd St. Suite 131 Address Hiami FL 33126 City/ State and Zip Code Luis a Suncoast Clevators. net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Juis 2. Timewez Name of Contact Person at (954) 249-8019 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Coastal Elevator Consultant and Communication	nServi
(Name of Corporation as currently filed with the Florida Dept. of State)	
P14000016693	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abit "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must coword "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ARY OF STATE
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Partha Bello Rodriguel Tugle Nw 2nd Street. (Florida street address)	
New Registered Office Address: Hiami, Florida 33120 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nan	ne, and
address of each Officer and/or Director being added:	

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	:						
X Remove	$\underline{\mathbf{v}}$	Mike Jon	<u>es</u>						
X Add	<u>sv</u>	Sally Smi	<u>ith</u>						
Type of Action (Check One)	<u>Title</u>	<u>]</u>	<u>Name</u>			<u>Addres</u> s			
Change Add Remove	Sec <u>ne</u>	tary .	Ray	Rodri	guez	7969 K Miam	ni FL 3	151.#13 13124	31
2) Change	yice Presi	- ictent.	Mar	Hm Bel	lo Rod	riquez	nd	[s]	12
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Remove								_	
4) Change		<u> </u>		_,_				<u> </u>	
Remove								-	
5) Change						·		_	
Remove								- -	
6) Change								_	
Remove								_	

(Attach additional sheets, if necessary).	(D'C -)
	(Be specific)
	-
	
	
 	
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The date of each amendment(s) adoption: 3/31/2014 date this document was signed.	_, if other than the
·	
Effective date if applicable: (no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4 1 2014	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver trustee, or other court appointed fiduciary by that fiduciary)	_
Luis R. Timenez (Typed or printed name of person signing) President	_
President (Title of person signing)	_