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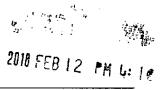
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TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: JJ CENTRAL COA	AST INC			
DOCUMENT NUMBE	P17000044805				
The enclosed Articles of	Amendment and fee are sul	omitted for filing.			
Please return all correspo	ondence concerning this mat	ter to the following:			
M	IARIA ORTIZ				
_		Name of Contact Persor	1		
IJ	CENTRAL COAST INC				
_		Firm/ Company			
61	191 ORANGE DRIVE UNI	T 6163			
		Address			
D	AVIE FL 33314				
		City/ State and Zip Code	e		
ORTIZI	M2017@HOTMAIL.COM				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information c	concerning this matter, pleas	e call:			
MARIA ORTIZ		954	8656826		
Name of	Contact Person	Area Co	de & Daytime Telep	hone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:		
Ameno Divisio P.O.B	Certificate of Status ag Address diment Section on of Corporations fox 6327 assee, FL 32314	Ameno Divisio Cliftor 2661 E	S52.50 Filing For Certificate of St Certified Copy (Additional Copies enclosed) Address Idment Section on of Corporations a Building Executive Center Circles assee, FL 32301	atus oy ele	ATTACHE
UMID	AINCEND	TO CORR		, -,	· / · · · · · · · · · · · · · · · · · ·

1 DODGETTO Charles Was

Articles of Amendment to Articles of Incorporation of



JJ CENTRAL COAST INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000044805	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	REMAINS THE SAME
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	REMAINS THE SAME
(Mutting dudress MAT BE A FOST OFFICE BOX)	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent REMAINS THE SAME	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Now Designation of Association (School Section 1)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>:</u> with and accept the obligations of the position.
Signature of New 1	Registered Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	ERICA ORTIZ	6130 SW 43 ST
Add			DAVIE FL 33314
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
nuaviciona for implementina the	endment if not contained in the amendment itself:
htovizions for unbigmenting the ame	
(if not applicable, indicate N/A)	

02-03-2018	
(s) adoption:	, if other than the
02-03-2018	
(no more than 90 days after amendment file date)	
	will not be listed as the
(CHECK ONE)	
	t
cast for the amendment(s) was/were sufficient for approval	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(voting group)	
e adopted by the board of directors without shareholder action and shareholder	
e adopted by the incorporators without shareholder action and shareholder	
a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
MARIA ORTIZ	
(Typed or printed name of person signing)	
PRESIDENT	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records. (CHECK ONE) The adopted by the shareholders. The number of votes cast for the amendment(s) approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s): cast for the amendment(s) was/were sufficient for approval (voting group) The adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder and adopted by the incorporator of the incorporator of the receiver, trustee, or other court oppointed fiduciary by that fiduciary) MARIA ORTIZ (Typed or printed name of person signing)

(Title of person signing)