(Re	equestor's Name)			
(Ac	idress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
	J. HORNE MAY 24 2025			
	MAY 29 LUES			

Office Use Only



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2025 NL / 28 FH 3: 17



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:(	05/28/2025	
Name:	Cheyanne Davis	
Reference #:	2774713	
		IOVACOAST, INC.
☐ Articles	s of Incorporation/Autho	rization to Transact Business
Ameno	lment	
✓ Chang	e of Agent	
☐ Reinsta	atement	
☐ Conve	rsion	
Merger	r	
☐ Dissolu	ution/Withdrawal	
Fictitio	us Name	
Other_		
Authorized Ar	mount: \$35.0	0
Signature:	Ohymo Paine	



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues please contact Cheyanne at 850-202-1882

Date:	05/28/2025				
Name:	Cheyanne Davis	_			
Reference #	2774713	_			
	NOVA	COAST, INC.			
	les of Incorporation/Authorization				
Ame	ndment				
✓ Char	nge of Agent				
Reins	statement				
Conversion					
☐ Merg	ger				
Disso	olution/Withdrawal				
☐ Fictiti	ious Name	•			
☐ Othe	r	<u></u>			
Authorized A	Amount: \$35.00				
Signature:	(Churme Prine				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is subt	nitted for a corporation orga	502, 607.1508, or 617.1508, Fto anized under the laws of the Sta stered agent, or both, in the Sta	te of California
	tion:	•	•
2. The principal office add			
3. The mailing address (if o	lifferent):		
4. Date of incorporation/qu	alification: March 30,	2009 Document number:	F09000001332
	ress of the current registered tate: (If resigned, enter resigned)	l agent and registered office on ned)	FILED FILED
	Corporation Ser	vice Company	_
	1201 Hay	s Street	28
	Tallahassee, Fl	32301-2525	
(if changed):	ress of the new registered ag	gent (if changed) and /or register	red office
	Jorth Calhoun St		
	P.O. Box NO	)T acceptable	
Tallal	nassee, FL 323	01	
The street address of its re as changed will be identicated	gistered office and the stree il.	et address of the business office	e of its registered agent.
Such change was authorized by the board, o	ed by resolution duly adopte the corporation has been n	ed by its board of directors or botified in writing of the chang	oy an officer so e.
/s/ Eron Howard		Eron Howard	COO
l further agree to comply v performance of my duties, agent. Or, if this documen	tment as registered agent a with the provisions of all sta	Printed or typed name and agree to act in this capacity atutes relative to the proper an accept the obligation of my po flect a change in the registered in writing of this change.	v. d complete
/s/ Timothy Mayville		5/28/2025	
Signature of Regis	•	Date	

Timothy Mayville, Assistant Secretary

Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*