# F53143

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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

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NAME OF CORPORATION: EASTCOAST RESTING & ENGINEERING, INC DOCUMENT NUMBER: F53143				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
CRAIG SCOTT SMITH				
Name of Contact Person EASTCOAST TESTING & ENGINEERING, INC.				
Firm/Company 4100 N. POWERLINE ROAD SUITE G-1				
POMPANO BEACH, FLORIDA 33073				
City/ State and Zip Code				
ETE@BELLSOUTH.NET				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
CRAIG SMITH at (954 ) 972.7645				
Name of Contact Person 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)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)				

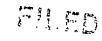
## Mailing Address

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**



# EASTCOAST TESTING & ENGINEERING, INC.

15 FEB 27 AM 10: 59

(Name of Corporation as currently filed with the Florida Dept. of State) F53143 (Document Number of Corporation (if known)

ume must be distinguishable and contain the		
ord "chartered," "professional association," o	Corp," "Inc," or "Co". A professional	
Enter new principal office address, if appli rincipal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )	
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or re new registered agent and/or the new registered	gistered office address in Florida, enter ered office address:	_
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or re new registered agent and/or the new registered	gistered office address in Florida, enter	_
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or re new registered agent and/or the new registered	gistered office address in Florida, enter ered office address:	_
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or renew registered agent and/or the new registered.)	gistered office address in Florida, enter ered office address: (Florida street address)	_

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
Change Add Remove	VP	ETIENNE PROPHETE, P.E	POMPANO BEACH, FL 330
2) Change	VP	MOHAMMED A. HAI, P.E.	4100 N. POWERLINE RD POMPANO BEACH, FL 330
Remove 3) Change Add			
Remove  4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	ling additional Artic heets, if necessary).	(Be specific)	<u> </u>		
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rovisions for imp	rovides for an exchi lementing the amer	ange, reclassifica	tained in the am	<u>ion of issued sna</u> endment itself:	res.
(if not applicat	ble, indicate N/A)		<u>-</u>		
NA					
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date this document was signed.	, if other than the
Effective date if applicable: FEBRIARY 20, 2015	
(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 CRAIG SMITH & DENISE S. SMITH (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_FEBRUARY 20. 2015	
Signature CRAIG SCOTT SMITH, PRESIDENT	
(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)	
CRAIG SCOTT SMITH	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_