

573191

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 AUG 02 A 11:12

FILED

AUG 18 2017

T. LEMIEUX

THE
COLEMAN LAW FIRM
PLLC

10161 CENTURION PARKWAY NORTH, SUITE 310 JACKSONVILLE, FLORIDA 32256
TEL: 904.448.1969 | FAX: 904.448.5244

July 28, 2017

Via U.S. First Class Mail

Florida Division of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **The Crescent Group, Inc.**
Restatement Tracking Number: CR9459328737

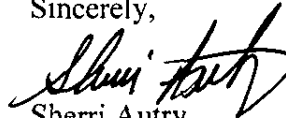
Dear Clerk:

Please find enclosed a Cover Letter, Articles of Amendment and check for filing fee in the amount of \$43.75 in the above-referenced matter.

Also enclosed is a completed Corporation Reinstatement Form for The Crescent Group, Inc. and check in the amount of \$4,350.00.

Thank you for your time in this matter. Please do not hesitate to contact us if you have any questions or need any additional information.

Sincerely,



Sherri Autry
Legal Assistant

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Crescent Group, Inc.

DOCUMENT NUMBER: J73197

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

C. Randolph Coleman
Name of Contact Person
The Coleman Law Firm, PLLC
Firm/ Company
10161 Centurion Pkwy N., Ste 310
Address
Jacksonville, FL 32256
City/ State and Zip Code
rcoleman@thecolemanlawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

C. Randolph Coleman at (904) 448-1969
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:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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

FILED

The Crescent Group, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

2017 AUG 12 A 11:12

J73197

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Coquina Beach Holdings, Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

12954 Spiceberry Circle South

Jacksonville, FL 32246

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

12954 Spiceberry Circle South

Jacksonville, FL 32246

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 C. Randolph Coleman

10161 Centurion Pkwy N, Ste 310

(Florida street address)

New Registered Office Address: Jacksonville

Florida 32256

(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, 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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	PST	Lynn Marie Kluger, as Personal Repr	8390 Reid Rd
<input checked="" type="checkbox"/> Add			Hastings, FL 32145
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	PD	Warren S. Kluger	3100 US 1 South
<input type="checkbox"/> Add			St. Augustine, FL
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	TD	David Arnold	251 San Marco Avenue
<input type="checkbox"/> Add			St. Augustine, FL
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	SD	John S. Robinson	821 Kallie Creek Lane
<input type="checkbox"/> Add			St. Augustine, FL
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach *additional sheets, if necessary*). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

[illegible]

July 28, 2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

August 1, 2017

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

☐ 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.

July 28, 2017

Dated _____

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)

Lynn Marie Kluger, as Personal Representative of the Estate of Warren S. Kluger

(Typed or printed name of person signing)

Personal Representative of the Estate of Warren S. Kluger

(Title of person signing)