114000005288

(Re	equestor's Name)		
(Address)			
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



200272139642

04/27/15--01007--024 **35.00

2015 APR 27 PH 1:42

MAY 01 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KAREN NUSBAUM (Name of Contact Person)
Please return all correspondence concerning this matter to the following:
KAREN NUSBAUM
(Name of Contact Person)
(Name of Contact Person)
EMERALD COAST SEARCH AND RESCUE
(Firm/ Company)
1619 MINNESOTA AVE (Address)
(Address)
tiva y mana Er dannin
LYNN HAVEN FL 3244U(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
10000 10000
(Name of Contact Person) at 850 - 625 - 8115. (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 Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

EMERALD COAST SEARCH AND RESCUE, INC

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

N 140 0000 5288

N1400000		
(Document Number	er of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Pr</i>	- Fi 55
A. If amending name, enter the new name of the corporation	on:	APR 2 CRETAI LAHAS
N A		The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" of	r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NIA	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		***
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac 		er the name of the
Name of New Registered Agent:	NIA	
New Registered Office Address:		street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered , I hereby accept the appointment as registered agent. I am fan		obligations of the position.
Si	gnature of New Registered	Agent, if changing

amenoing 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 tetter 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 hetd. 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 X Remove X Add		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)		JASON KLINGENSMITH	5106 COLLINS ST CALLAWAY FL 32404.
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
·				
				

The date of each amendment(s) adoption date this document was signed.	otion:	4 24 15	•	, if other than the
Effective date <u>if applicable</u> :		4/24/15.		
	(no more than	ı 90 days after amen	dment file date)	
Note: If the date inserted in this block document's effective date on the Depart			filing requirements, this date wil	I not be listed as the
Adoption of Amendment(s)	(CHECK O	<u>NE</u>)		
The amendment(s) was/were adop was/were sufficient for approval.	oted by the membe	ers and the number of	f votes cast for the amendment(s)	ı
There are no members or member adopted by the board of directors		on the amendment(s)	. The amendment(s) was/were	
Dated	+124/15.	, 		
Signature	//.	TA	3	
(By the chairm have not been		corporator - if in the	dent or other officer-if directors hands of a receiver, trustee, or	
	KAREN	NUSBAUM		
	(Туре	ed or printed name o	f person signing)	
	P	ZESIBENT.		
		(Title of perso	n signing)	