# P03000052670

(Red	uestor's Name)	
(Add	ress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
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#### **COVER LETTER**

TO: Amendment Section
Division of Corporations



NAME OF COR	PORATION;	Emerald Coast Coffee I	nc.
DOCUMENT NU	JMBER:	P03000052670	·
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Ruth Alford	
	Γ	Name of Contact Person	
	En	nerald Coast Coffee	
		Firm/ Company	
	1	49 Baywind Drive	
		Address	
	N	liceville, FL 32578	
		City/ State and Zip Code	
	Ruth E-mail address: (to be use	alford@cox.net ad for future annual report notification)	· · · · · · · · · · · · · · · · · · ·
For further inform	ation concerning this matter,	please call:	
	Ruth Alford	at ( 850 ) 8	97-9670
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	tment of State:
□\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301



October 26, 2011

RUTH ALFORD 149 BAYWIND DRIVE NICEVILLE, FL 32578

SUBJECT: EMERALD COAST COFFEE, INC.

Ref. Number: P03000052670

We have received your document for EMERALD COAST COFFEE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L01000001677.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 811A00024440

## Articles of Amendment to Articles of Incorporation

 $\mathbf{of}$ 

Emer	ald Coast Coffee, Inc.	
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)	
P(	03000052670	
(Document N	lumber of Corporation (if known)	
Pursuant to the provisions of section 607.19 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Profit Corporation</i> ado	pts the following
A. If amending name, enter the new name	of the corporation:	
Emerald C	oast Business Consulting Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t	n the word "corporation," "company," or "incorporate the designation "Corp," "Inc," or "Co". A professional corofessional association," or the abbreviation "P.A."	ed" or the
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new recommendation.	r registered office address in Florida, enter the name of t	TINOV IS PH 2: QI
Name of New Registered Agent:	Ruth Alford	
New Registered Office Address:	149 Baywind Drive, (Florida street address)	
	Niceville , Florida 3257 (City) (Zip Code)	8
New Registered Agent's Signature, if chan I hereby accept the appointment as registered	ging Registered Agent:  d agent. Lam familiar with and accept the obligations of the  Signature of New Registered Agent, if changing	? position.

### 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			
	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe		
<u>provisio</u>	nendment provides for an exchange, rans for implementing the amendment of applicable, indicate N/A)		

The date of each amendment	t(s) adoption: October 20,2011
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/weby the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	Ctobor 25 2011
Signature	THATON
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)