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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: COASTAL SEVE	N, INC.		
	BER: P03000105119	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles	s of Amendment and fee are su	abmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	CINDY HART			
		Name of Contact Pers	son	
	COASTAL SEVEN, INC.			
		Firm/ Company	-	
	8440 SW 198TH STREET			
	MIAMI, FL 33189			
		City/ State and Zip Co	ode	
jhj <del>r6</del>	8@aol.com			
	E-mail address: (to be u	sed for future annual repo	rt notification)	
For further information	on concerning this matter, plear	se call:		
CINDY HART		at ( <sup>305</sup>	301-6989	
Name	of Contact Person	Area (	Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida De	partment 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)	
Ma	iling Address	Stree	et Address	
	endment Section	Ame	ndment Section	
	ision of Corporations		ion of Corporations	
	. Box 6327 lahassee, FL 32314		on Building Executive Center Circle	
		2661 Executive Center Circle		

Tallahassec, FL 32301

## Articles of Amendment to Articles of Incorporation of

COASTAL SEVEN, INC.				
(Name of Corpo	oration as currently filed wi	th the Florida Dept. of Stat	<b>:e</b> )	
	ocument Number of Corporat	tion (if known)		<b>-</b>
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	lorida Statutes, this <i>Florida P</i>	Profit Corporation adopts the	following amen	ıdment
A. If amending name, enter the new name of the	he corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," or	Corp," "Inc," or "Co". A	pany," or "incorporated" of professional corporation nai	The or the abbrevion or the or	ation
B. Enter new principal office address, if applic				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)  D. If amending the registered agent and/or registered agent and/or the new registered agent.	<u></u>	orida, enter the name of the	2019 AUG - 2 PH 2: 30 SEC LAHI/SSEE FEE	
Name of New Registered Agent				
	(Florida street address	,	<del></del>	
New Registered Office Address:	(City)	, Florida	(Lip Code)	<del></del>
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: ent. I am familiar with and a	ccept the obligations of the p	osition.	
	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, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld. 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 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>Y</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
1) Change	PD	ROBERT C. CUMMINGS	5241 NE 3RD TERR.
Add			FT, LAUDERDALE, FL 33334
X Remove			
2) Change	PD	CINDY HART	8440 SW 198TH STREET
X Add			MIAMI, FL 33189
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O Chan-			
6) Change	<del></del>	<del></del>	
Add			
Remove			

	, if necessary).	(Be specific)			
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in amendment nrovi	des for an excha	inge, reclassifica	<u>ition, or cancellat</u>	ion of issued shar	es.
	enting the amen	<u>lament it not con</u>	tained in the am	enament itseil:	
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: (no more	than 90 days after amendment file date)
(no more	man 20 days after amenament fire dates
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	e applicable statutory filing requirements, this date will not be listed as thords.
Adoption of Amendment(s) (CHECK ONE	
■ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	rs. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group enti	
"The number of votes cast for the amendment(s) w	••
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of diaction was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporate action was not required.	rs without shareholder action and shareholder
Dated July 26, 3	<u> 2019 .    </u>
Signature James Cu	and min day
(By a director, president or oth	er officer – iclirectors or officers have not been
selected, by an incorporator – appointed fiduciary by that fiduciary by that	if in the hands of a receiver, trustee, or other court
JOAN L. CUMMINGS	<b>;</b>
(Typed or p	rinted name of person signing)
VICE PRESIDENT	
	(Title of person signing)