

Florida Department of State Division of Corporations

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From:

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**Enter the email address for this business entity to be used for futilizing annual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ATLANTIC COASTAL ENGINEERING, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION:	ATLANTIC (COASTAL EN	GINBER	ING, INC.
DOCUMENT NUMBER: PO	3000147578			
The enclosed Articles of Amenda	ment and fee are s	abmitted for filling	} -	
Please return all correspondence	concerning this me	atter to the follow	ing:	
	Bl	aine H. Hi	bberd,	Raq.
	Bla	Number Con Line H. Hi		•
		Firm/ Co		
·	612	SE Centra		cway
	Stu	art, Plori		994
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		pete@hibl:	aw . com	
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Blaine H. Hibber	d, Esq.	01 (772	600-7646 Daytime Telephone Number
Name of Contact	Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ving omount made	payable to the Fi	orida Depa	riment of Sune:
	:.75 Filing Fee & tificate of Status	Certified Co (Additional c enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy Is enclosed)
Mailing Addin Amendment Se Division of Co P.O. Box 6327 Tollahassee, Fl	ction parations		Amend Division Clifton 2661 Ex	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

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Articles of Amendment to Articles of Incorporation SECRETARY OF STATE TALLAHASSEE, FLORIDA

	of	· .	
Atlantic Coasta	al Engineering, I	nc.	*
(Name of Corporation as curren	lly filed with the Florida Der	ot. of State)	
P030	00147578		_
(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	orida Statutes, this <i>Florida Po</i>	ofit Corporation adopts the follow	ing amendmeni(s)
A. Hamending name, enter the new name of the	he corporation:		
			The nor
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Covord "chartered." "professional association," or	"orp," "Inc," or "Co". A pi	any," or "incorporated" or the rofessional corporation nume smis	abbreviation t contain the
B. Egger new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>	able: ADDRESS)		-
C. <u>Enter new malling address, if applicable:</u> (Malling address <u>MAY BE A POST OPPICE</u>			-
D. If amending the registered agent and/or reg new registered agent and/or the new regists Name of New Registered Agent	istered office address in Flor tred office address:	ids, enter the name of the	_
	(Florida street address)		
New Registered Office Address;		, Florida	_
·	(Clo)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appaintment as registered age	ni. I am fomiliar with and ac		
Sianature o	of New Registered Agent, if chi	anging	

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If amending the Officers and/or Directors, enter the little 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 latter 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 thie, list the first letter of each office hold. 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 Y. There is a change, Alke Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc. PT as a Change, Mike Jones, Y as Remove, and Sally Smith, SV as an Add.

X Change	<u>et</u>	John Dos	
X Remove	Ā	Mike Jones	
_X ∧dd	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Litle	<u>Name</u>	Address
1) Сналде	<u>P</u>	David H. Corrigan, Sr	5485 Orchid Bay Dr.
Add			Palm City, FL 34990
X Remove			<u> </u>
2) Change	<u>p</u>	David H. Corrigan, Jr.	1321 SE Decker Ave
bbA X			Stuart, FL 34994
Remove			
3)Change`			
^dd			
Řemovo			
4) Change			
Aud			
Remove			
3) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			

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	g odditional Arife is, if necessary).	(Be specific)			
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an amendment prov provisions for imples (if not applicable,	ldes for an excha tenting the amen indicate N/A)	apes, reclassific desent if not co	ation, or cancelle ntained in the an	ulon of issued sh rendment liself:	ares.
					

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The date of each	n amendment(s) adoption: September 26, 2012
Mective date <u>if</u>	applicable: (no more than 90 days after omendment file date)
idoption of Am	endment(s) (CHECK ONE)
	ent(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) olders was/were sufficient for approval.
The amendme	ent(s) was/were upproved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):
"The nu	mber of votes east for the amendment(s) was/were sufficient for approval
py	
	(wiling group)
The amendment of the last Control of the last	eni(s) was/wore subopted by the board of directors without shareholder section and shareholder trequired.
The amendme action was not	ent(s) was/were adopted by the incorporators without shareholder action and shareholder trequired.
	Dated September 26, 2012
X	Signature Ray Carri 1/1
, ,	(By a director, president or other officer – it directors or afficers have not been
	selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	appointed transfats by time transfats.
	Raymond M. Corrigan
	(Typed or printed name of person signing)
	VP
	(Title of person signing)

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