P05000104549

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Amend + M/C

1B 1-26-11

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: PRECISION CARPENTRY BYSC, Inc
DOCUMENT NUMBER: P0500010 4549.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SEAN M CARLISI Name of Contact Person
EAST COAST CONSTRUCTION SD, Inc (New Name)
438 SW College Park Rel
Port ST lucie, FL, 34953. City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SEAW M. CARLISI at (772) 413-1393 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 \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to

Articles of Inco	rporation /	
of	r// r-	
TRECISION CARPENTRY	By S.C. Inc 2011 JAN 24 PM 2:59	
(Name of Corporation as currently filed with the Florida Dept. of State)		
P05000104549		
(Document Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
FAST COAST CONSTRUCTION	ISDINC The nav	
name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Co	orp," "Inc," or "Co". A professional corporation	
name must contain the word "chartered," "professional associa		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	PORT ST Lucie, FL, 34953.	
(Trincipul office unuress MOST DE ASTREET ADDRESS)	PORT ST Lucie, FL, 34953.	
	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	438 SW College Park Rd	
(PORT ST Luce, FL, 34953	
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: DEAN I	M. Caplisi	
438 SI	W College PARK Ref	
New Registered Office Address: (Florid	ia street addressy	
PORT ST L	weie Florida 34953	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Ag	zent;	
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		

(Attach additional sheets, if necessary) **Title** <u>Address</u> **Type of Action** SEAN M Carlisi Diosvany Ramos ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

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:

The date of each amendment(s) adoption://19/20//
Effective date if applicable:	(19 (date of daoption is required)
*	(no more than 90 days after amendment file date)
	,
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) the sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	voting group)
((voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated/	10/2011
Signature	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	SEAN M. CARLIST. (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)