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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: Emerald Coast Pe	rmitting, Inc.		_
DOCUMENT NUM	BER: P05000158758			_
	s of Amendment and fee are si	ubmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	Candi L. Gray			
		Name of Contact Perso	n	
	Emerald Coast Permitting, In	nc.		
		Firm/ Company		
	141 Mack Bayou Loop, Suit	e 303		
		Address		
	Santa Rosa Beach, FL 3245	9	•	····4
		City/ State and Zip Cod	le	SECONOMIC SECONO
emer	raldcoastpermitting@cox.net			超星上
	E-mail address: (to be u	sed for future annual report	notification)	- 3× 20 1
	•	·	,	20 AM
For further information	on concerning this matter, plea	se call:		FILL 20 AM II: 56
Candi L. Gray		,850	837-7444	5.6
<u> </u>	of Contact Person	at ()ode & Daytime Telephone N	
Name	of Contact Terson	Area Co	oue & Daytime Telephone N	umber
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)	
Am	iling Address endment Section ision of Corporations	Amend	Address Iment Section on of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

Emerald Coast Permitting, Inc.						
(Name	of Corporation as current	ly filed with the Florida Dept. of State)			
P05000158758						
	(Document Number of	of Corporation (if known)				
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the f	following a	amendi	ment(s) to	
A. If amending name, enter the new n	ame of the corporation:					
			7	The n	ew	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation nam	r the abb	reviati	on	
B. Enter new principal office address,	if annlicable:	141 Mack Bayou Loop, Suite 303				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		Santa Rosa Beach, FL 32459			_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		141 Mack Bayou Loop, Suite 303	SECK TALL A	ال 16	- _ } `	
		Santa Rosa Beach, FL 32459	NE SE	12	Continue.	
			77	-	- \$	
				=	_ <u> </u>	
D. If amending the registered agent ar new registered agent and/or the ne				1: 56	**************************************	
Name of New Registered Agent	Arnett & Kerrigan, P.L.					
	600 Grand Boulevard, Suite 206					
	(Florida st	reet address)				
New Registered Office Address:	Miramar Beach 32550					
	(City)		(Zip Co	de)	-	
Non-Bosistand America Cinciana						
New Registered Agent's Signature, if c I hereby accept the appointment as regist			osition.			
	\\m\G					
/	Signature of New I	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, and 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 = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. 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	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_		-	
Add					
Remove					
2) Change		_		_	
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add		_		-	
Remove					
6) Change		-		-	
Add				-	
Remove					

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fan	amendment provides	for an exchan	ge, reclassifica	ation, or cancel	lation of issued	shares.	
prov	amendment provides visions for implementi (if not applicable, indi	ing the amend	ment if not co	ntained in the a	mendment itsel	<u>f:</u>	
,	(у ног аррисаоле, так	cate N/A)					
_							
							

The date of each amendment(s) adoption:	, if other than the
date this document was signed. July 1, 2016 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided 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)	
(voling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	lder
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary) Candi L. Gray	er court SSFF 20 AM II
(Typed or printed name of person signing)	<u>ू</u> य
President	∰ 6

(Title of person signing)