P06 0000 59035

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	e #)
	_
PICK-UP WAIT	MAIL.
(Business Entity Nan	ne)
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
opostar modulations to rining children	

Office Use Only



100364905391

04/27/21--01002--029 ++85.5g

RECEIVED
APR 2 6 2021

CLASSES FRORDA

FILED



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COL	RPORATION: EAST COAST	MANAGEMENT AND CON	STRUCTION CORP
	UMBER: P06000059035		
The enclosed Art	icles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this ma		matter to the following:	
	MICHAEL ABRAMS		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	EAST COAST MANAGE	MENT AND CONSTRUCTI	ON CORP
	······································	Firm/ Company	
	5061 OAKES RD		
		Address	··
	DAVIE, FL 33314		
		City/ State and Zip Cod	e
	mabrams@sti-fl.com		
	E-mail address: (to be	used for future annual report	notification)
For further inform	nation concerning this matter, pl		. 327-2434
N	ame of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount mad		
■ \$35 Filing Fe	ee □\$43.75 Filing Fee & Certificate of Status	-	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address ment Section n of Corporations entre of Tallahassec V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EAST COAST MANAGEMENT AND CONSTRUCTION CORP

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments articles of Incorporation: A. If amending name, enter the new name of the corporation: EAST COAST WASTE SERVICE CORP The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) 5061 OAKES RD DAVIE (Florida street address)	(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments articles of Incorporation: A. If amending name, enter the new name of the corporation: EAST COAST WASTE SERVICE CORP The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) S061 OAKES RD DAVIE (Florida street address) S061 OAKES RD DAVIE (Florida street address)	P06000059035	
A. If amending name, enter the new name of the corporation: EAST COAST WASTE SERVICE CORP The new name must be distinguishable and contain the word "corporation," "company, "or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) 5061 OAKES RD DAVIE, FL 33314	(Document Nur	mber of Corporation (if known)
The new mast be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) S061 OAKES RD DAVIE, FL 33314	Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) 5061 OAKES RD DAVIE (Florida street address) 5061 OAKES RD DAVIE	A. If amending name, enter the new name of the corporati	ion:
name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) S061 OAKES RD (Florida street address) S061 OAKES RD Agents and Sociation "Corp." "Inc.," or "Co". A professional corporation name must contain the word corporation name must contain the wo	EAST COAST WASTE SERVICE CORP	The new
DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 DAVIE, FL 33314 DAVIE, FL 33314 DAVIE, FL 33314	"Inc.," or Co.," or the designation "Corp." "Inc," or "Co	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
DAVIE, FL 33314 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DAVIE, FL 33314 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 (Florida street address) 5061 OAKES RD (Florida street address)		
DAVIE, FL 33314 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 (Florida street address) 5061 OAKES RD DAVIE 33331451	(Principal office address <u>MUST BE A STREET ADDRESS</u>)	DAVIE, FL 33314
O. 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 (Florida street address) 5061 OAKES RD		
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 (Florida street address) 5061 OAKES RD DAVIE		5061 OAKES RD
Name of New Registered Agent (Florida street address) 5061 OAKES RD DAVIE		DAVIE, FL 33314
Name of New Registered Agent (Florida street address) 5061 OAKES RD DAVIE	D. If amonding the registered point and/or registered age.	
(Florida street address) 5061 OAKES RD DAVIE		
5061 OAKES RD DAVIE : 33314\square	Name of New Registered Agent	
5061 OAKES RD DAVIE : 33314\square		
	(Flor	rida street address)
, FIOLIAI ,	New Registered Office Address: 5061 OAKES RD Da	AVIE Florida 333140
(City) Zip Coden		
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent:
Signature of New Registered Agent, if changing	Signature of N	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, 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<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			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
<u> </u>		
		
		
		· _
-		
-		
		
an amendment provides for an avalua-	name malaciff	
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		-
		-

The date of each amendment(s) date this document was signed.	-	, if other than the
	4/20/2021	
Effective date if applicable:	(no more than 90 days a	fter amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable sta Department of State's records.	stutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of	directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The numbe sufficient for approval.	r of votes cast for the amendment(s)
☐ The amendment(s) was/were a must be separately provided)	approved by the shareholders through vo For each voting group entitled to vote sep	ting groups. The following statement arately on the amendment(s):
"The number of votes ca	ist for the amendment(s) was/were suffic	ient for approval
by		
	(voting group)	
Dated	04/20k1	
Signature		
By a select	director, president or other officer – if d ted, by an incorporator – if in the hands inted fiduciary by that fiduciary)	irectors or officers have not been of a receiver, trustee, or other court
	MICHAEL ABRAMS	
	(Typed or printed name of	person signing)
	PRESIDENT	
	(Title of person signing)	