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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Florida Coastal Jac	ksonville Realty INC					
DOCUMENT NUME	P07000126373						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
	Carol McMenamy	·					
	Name of Contact Person						
	Florida Coastal Jacksonville Realty, INC						
•	Firm/ Company						
	548 Battersea Dr						
•		Address					
	St Augustine, FL 32095						
		City/ State and Zip	Code				
	carolmc@floridacoastaljax.c	om					
	E-mail address: (to be us	ed for future annual r	eport notification)				
For further information	concerning this matter, pleas	9()4	616-8825				
	of Contact Person	at (Are	a Code & Daytime Telephone Number				
	the following amount made						
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fe Certified Copy (Additional copy i enclosed)	Certificate of Status				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

Articles of Amendment to Articles of Incorporation of

Florida Coastal Jacksonville Realty, INC (Name of Corporation as currently filed with the Florida Dept. of State) P07000126373 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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) New Registered Office Address: (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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

Check if applicable

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

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 <math>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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>v</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	d	Aaron McMenamy	2971 McCrone Way	
x Add			Jacksonville, FL 32216	
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add			_ 	
Remove				
5) Change			_	
Add				
Remove				
6) Change				
Add			-	
Remove				

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
- ···	-			
			· · · · · · · · · · · · · · · · · · ·	•
 				
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		1000 s <u>.</u> .		
	16.5-			
f an amendment provides for an exch	iange, reclassificatio	n, or cancellation of i	ssued shares,	
provisions for implementing the ame	ndment if not conta	ned in the amendmen	<u>it itself:</u>	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

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The date of each amendment(s) adoption: _	77-24-	. Z4	, if other than the
date this document was signed.			
8-1-2024			
Effective date <u>if applicable</u> :	(no more than 90	days after amendment	file date)
Note: If the date inserted in this block does			
document's effective date on the Department of	of State's records.		
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by the action was not required.	e incorporators, or bo	oard of directors withou	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		number of votes cast fo	or the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	endment(s) was/were	sufficient for approva	1
by			
(ve.	oting group)		
Dated 7 - 21	2.24		
Dated			
Signature	bull W	Wn	
	sident or other office	r – if directors or offic	ers have not been
		hands of a receiver, tru	
appointed fiduciar	y by that fiduciary)		
Carol Mcl	Menamy		
	(Typed or printed n	ame of person signing)	
vice presi	ident		
	(Title of person sign	ning)	· · · · · · · · · · · · · · · · · · ·

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