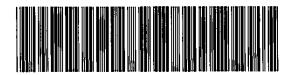
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(Re	questor's Name)	
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FILED
2009 JUN 15 AMII: 14
SECRETARY OF STATE

N/C TB 6/17/09

COVER LETTER

TO: Amendment Section
Division of Corporations

The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rosie Blanco Name of Contact Person Lydecker Lee Behar Berga & deZayas, LLC Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code rl@lydeckerlaw.com, and rb@lydeckerlaw.com	
Please return all correspondence concerning this matter to the following: Rosie Blanco Name of Contact Person Lydecker Lee Behar Berga & deZayas, LLC Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
Rosie Blanco Name of Contact Person Lydecker Lee Behar Berga & deZayas, LLC Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
Name of Contact Person Lydecker Lee Behar Berga & deZayas, LLC Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
Lydecker Lee Behar Berga & deZayas, LLC Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
Firm/ Company 1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
1201 Brickell Avenue, 5th Floor Address Miami, FL 33131 City/ State and Zip Code	
Miami, FL 33131 City/ State and Zip Code	
Miami, FL 33131 City/ State and Zip Code	
City/ State and Zip Code	
rl@lvdeckerlaw.com, and rb@lvdeckerlaw.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Rosie Blanco at (305) 416-3180	
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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee & □\$60.50 Filing Fee & □\$52.50 Filing Fee & □\$60.50 Filin	atus
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

i ational	Shoreline	Solutions,	Inc.
valiona i	CHOICHIC	Colutions,	1110.

Articles of An	nendment
Articles of Inco	orporation Ons, Inc. Che Florida Dept. of State on (if known)
National Shoreline Solution	ons, Inc. ALECRE
(Name of Corporation as currently filed with t	he Florida Dept. of State
P09000051020	
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation	<u>n:</u>
Natural Shoreline Solution	ns, Inc. The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations of the contain the word "corp abbreviation "Corp.," "Inc.," or Co., "or the designation "Corp abbreviation "Corp.," "Inc.," or Co., "or the designation "Corp abbreviation "corp abbreviation" or Co., "or the designation or Co., "or the designation of the corp abbreviation or contain the word "corp abbreviation" or co., "or the designation of the corp abbreviation or contain the corp abbreviation or	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Not Applicable
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
New Registered Office Address: (Flori	da street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fami	uar wun ana accepi ine oouganons oj ine position.
Signature of 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	ending or adding additional Articles additional sheets, if necessary). (E		
NI/A			
N/A	<u>·</u>		
F. Ifan	amendment provides for an exchan	ige reclassification or cancellat	ion of issued shares
provi	sions for implementing the amendr		
(ij	not applicable, indicate N/A)		
N/A			
- 			
·.		· · · · · · · · · · · · · · · · · · ·	
		 	

The date of each amendmen	t(s) adoption: 6/	11/2009
Effective date if applicable:	6/11/2009	(date of adoption is required)
Zarective date it applicable.	(no more than 9	0 days after amendment file date)
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
The amendment(s) was/we must be separately provide	ere approved by the ed for each voting	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	dment(s) was/were sufficient for approval
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated 6/12	2/2009	
sele		ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court y that fiduciary)
		Rosie Blanco
	(Тур	ped or printed name of person signing)
		Incorporator
	(Title of	person signing)