

P100000050760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

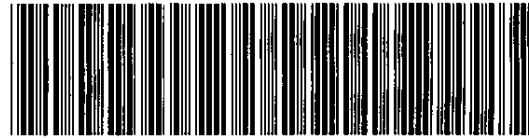
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts NOV 15 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COASTAL SPORTS, INC.

DOCUMENT NUMBER: P100000050760

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIKE TROYELL

Name of Contact Person

COASTAL SPORTS, INC

Firm/ Company

112 WISE AVE

Address

Niceville, FL 32578

City/ State and Zip Code

MIKE@COASTALSPORTS.GA MAIL.COM

MIKE R. COASTALSPORTS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

AM

For further information concerning this matter, please call:

MIKE TROYELL

Name of Contact Person

at (850) 725-1111

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 &
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 Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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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>	<u>Type of Action</u>
VP	DANA TOPEL	1715 OSCEOLA BAY AVE NICEVILLE, FL 32578	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
SEC/TREAS	JUNE C. TROXELL	1632 SARDINIA NICEVILLE, FL 32578	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
SEC	MICHAEL W. TROXELL	1632 SARDINIA COVE NICEVILLE, FL 32578	<input type="checkbox"/> Add <input checked="" type="checkbox"/> 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)

OR. ISSUED SHARES

MIKE TROXELL = 10,000 SHARES

DANA TOPEL = 0 SHARES

The date of each amendment(s) adoption: 10-27-2010
(date of adoption is required)
Effective date if applicable: 10-27-2010
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10-27-2010

Signature


(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MIKE TROXELL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)