P100000 50869

(Re	questor's Name)	
(Ad	ldress)	:
(A.	ldress)	
(AC	iuless)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200235438932

06/14/12--01010--018 **35.00

Money

ECKETAKY OF STATE

ALL HASSES FROM

TALL HASSES

JUN 14 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: <u>COASTAL</u> BER: <u>P1000005086</u>		VICES IN
	of Amendment and fee are su		
Please return all corres	spondence concerning this mat	ter to the following:	
	NICHOLAS FANE	ELLA	
		Name of Contact Persor	ì
	PROFESSIONAL	OFFICE SERV	ICE
		Firm/ Company	
	434 TANGLEWO	OD DRIVE	
		Address	
	FT WALTON BEA	ACH FL 32547	
		City/ State and Zip Code	2
NF	ANELLA@COX.N	FT	
E-mail address: (to be used for future annual report notification)			
	,	•	,
For further informatio	n concerning this matter, pleas	e call:	
NICLIC: AC I		050	000 7101
NICHOLAS R FANELLA at (850) 862-7131			
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made I	payable to the Florida Depa	urtment 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		Street	<u>Address</u>
	endment Section	Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



COASTAL DRYWALL SERVICES INC

(Name of Corporation as current)	y filed with the Flori	ida Dept. of State)	A SOCIAL OF	ATE
P10000050869			. 40/	TIDA
(Document Number	r of Corporation (if kr	iown)		-
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this <i>Flo</i>	rida Profit Corporati	on adopts the following	g amendment(s) to
A. If amending name, enter the new name of the	e corporation:			
				_The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	orp," "Inc," or "Co	". A professional coi	corporated" or the a rporation name must	bbreviation contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A				-
	•			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)			
	-			-
D. If amending the registered agent and/or reginew registered agent and/or the new register		in Florida, enter the	e name of the	-
	red office address.			
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:		, Flo	orida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered ager	nt. I am familiar with	and accept the obliga	ations of the position.	
Signature o	f New Registered Age	nt, 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP	RAUL SALAZAR	938 MCFARLAND FORT WALTON BEACH FL 32547
2) Change Add Remove	<u>VP</u>	ENRIQUE RODRIGUEZ NAVA	938 MCFARLAND CT FORT WALTON BEACH FL 32547
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	<u></u>		

	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
		
		<u> </u>
····	<u> </u>	
<u>.</u>		
provis	nendment provides for an exchange, reclassification, or cancellation of issued share ions for implementing the amendment if not contained in the amendment itself: *not applicable, indicate N/A)	<u>es,</u>
		
<u> </u>		

The date of each amendment(s)	adoption: JUNE 11, 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voiting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated JUNE	9, 2012
Signature B	ENBRIO RUEDA - VAZACEZ
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	BERNARDO VASQUEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)