Division of Corporations Electronic Filing Cover Sheet

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From:

Account Name : WILSON TAX & ACCOUNTING INC.

Account Number: I20150000107

Phone : (941)625-1925

Fax Number : (941)625-1526

Enter the email address for this business entity to be used for ful annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN WEST COAST CONTRACTING INC.

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

NAME OF CORPO	ORATION: West Coast Contract	cling Inc.		
	91100090933			
The enclosed Article	es of Amendment and fee are sub	omitted for filing.		
Please return all con	respondence concerning this mat	ter to the following:		
	Jamie Bunkley			
		Name of Contact Person	n	
	Tax Savers			
		Firm/ Company		
	1300 Enterprise Dr Ste A			
	-	Address		
	Port Charlotte FL 33953			
		City/ State and Zip Cod	e	
Jar				
_	E-mall address: (to be us			
For further informat	tion concerning this matter, pleas	e call:	n na	
Jamie Bunkley		· 941	625-1925	
Narr	ne of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check	for the following amount made p	payable to the Florida (Dep	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ā		Amend		
	Division of Col NAME OF CORPO DOCUMENT NUM The enclosed Article Please return all cor For further informat Jamie Bunkley Nam Enclosed is a check \$35 Filing Fee	The enclosed Articles of Amendment and fee are sufficient of Status Port Charlotte FL 33953	Division of Corporations NAME OF CORPORATION: West Coast Contracting Inc. DOCUMENT NUMBER: P11000080933 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jamie Bunkley Name of Contact Person Tax Savers Firm/ Company 1300 Enterprise Dr Ste A Address Port Charlotte FL 33953 City/ State and Zip Cod Jamie@taxsaversfl.net E-mall address: (to be used for future annual report For further information concerning this matter, please call: Jamie Bunkley Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Dep \$35 Filing Fee Certificate of Status Mailing Address Amendment Section Mailing Address Amendment Section Street Amendment Section	Division of Corporations NAME OF CORPORATION: West Coast Contracting Inc. P1000080933 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jamie Bunkley

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

Division of Corporations
Clifton Bullding
2661 Executive Center Circle
Tallahassee, FL 32301

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850-817-8381

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October 8, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

WEST COAST CONTRACTING INC. 2495 FRANKFORT CT. NORTH PORT, FL 34288

SUBJECT: WEST COAST CONTRACTING INC.

REF: P11000060933

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

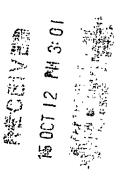
Period after (INC) in the corporate name.

If you have any questions concerning the filing of your document, please $\frac{1}{2} \frac{1}{2} \frac{1$

Irene Albritton Regulatory Specialist II

FAX Aud. #: B15000239681 ***

II Letter Number: 615A00021305



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Articles of Amendment to Articles of Incorporation oſ

712/2015 13:55 FAX 94162515	34 TAXSAVERS			<u>1</u> 004/007
	Articles of Amendment to Articles of Incorporation of		NALLAHASSA	KILL MASS
West Coast Contracting Inc.			<u></u>	<u></u>
(Name P11000080933	of Corporation as currently filed with	the Florida Dept. of State)		%
11100000000000	(Document Number of Corporation	ı (if known)		200
Pursuant to the provisions of section 607 its Articles of Incorporation: A. If amending name, enter the new n	7.1006, Florida Statutes, this <i>Florida Proj</i>	it Corporation adopts the follo	owing amendme	nl(s) lo
	ntain the word "corporation," "compa		The new	
word "chartered," "professional associ B. Enter new principal office address (Principal office address <u>MUST BE A.</u>	, If upplicable:			
C. Enter new malling address, if app (Mailing address <u>MAY BE A POST</u>	licable: OFFICE BOX)). (<u>) ()).</u> (Ma E ()
D. If amending the registered agent a new registered agent and/or the new registered agent agent and agent age	nd/or registered office address in Flori w registered office address:	da, enter the name of the		D. 1 (apr) 1 %
Name of New Registered Agent		54, 64 CC 36 OCT	्रातात ः ।	, <u>,</u>
	(Florida street address)			
New Registered Office Address	:(Cliy)	, Florida	(Zip Code)	
New Registered Agent's Signature, if I hereby accept the appointment as regis	changing Registered Agent: elered agent, I am familiar with and acc	ept the obligations of the posit	ion.	

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)

Please note the officer/director title by the first letter of the office title:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D \cdot Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	¥	Mike Jones		
X Add	<u>sy</u>	Sally Smith		
Type of Action	Titlo	Name	Address	
(Check One) 1) Change	٧	Nikolay Polkhovskiy	2928 Wells Ave	
X Add			North Port, FL 34286	
Remove				_
Ohanna d				0
2) Change				
	ntelle i	e general de Aria.		By C a
3)Change				Char
Add				
Remove	tion and the same	eta	·	A rec
4) Change	•••	· · · · · · · · · · · · · · · · · · ·		
^dd	•			·
Remove				
5) Change				
Add				
Remove				_
σ)Change				
Add			-	
Remove				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
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Company of the second s	••	
. If an amendment provides for an exchange, reclassification, or expediation of issued shares	.	
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)		professional and a second
	· · · · · ·	
		
		
	•	

The date of each amendment(s) ad-	option:	, if other than the	
date this document was signed.		-	
Effective date if applicable:	(no more than 90 days after amendment file date)		
	,		
Note: If the date inserted in this blidocument's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(x) was/were adop by the shareholders was/were suf	pied by the shareholders. The number of votes cast for the amendment(s) fficient for approval.		
	roved by the shareholders through voting groups. The following statement each voting group entitled to vate separately on the amendment(s):		
"The number of votes east f	for the amendment(s) was/were sufficient for approval		
by			
	(voting group)		
	pted by the board of directors without shareholder action and shareholder		
action was not required.			n 72 1
The amendment(s) was/were adopted.	pted by the incorporators without shareholder action and shareholder		कास्त्रपत्र स्टा ११ इ.स.च्याची स्टाह्मी
Dated	400		ව සප්දි _
DatedSignature	· Com	· · · · · · · · · · · · · · · · · · ·	ව සප්දි _
Signature (By a di	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	· · · · · · · · · · · · · · · · · · ·	Dated, _
Signature (By a di selected appoint	i, by an incorporator - if in the hands of a receiver, trustee, or other court		Dated, _
Signature (By a di selected appoint	it by an incorporator — if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)		Signal m
Signature (By a di selected appoint	i, by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) Viktor Romanyu ^a		ව සෙදු _