P12000102289

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TO: Amendment Section

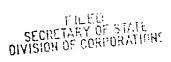
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CCFS GULF COAST INC DOCUMENT NUMBER: P12000102289 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PRAVIN N PATEL Name of Contact Person Firm/ Company 2426 E SEMORAN BLVD Address APOPKA FL 32703 City/ State and Zip Code pravin.taxpro@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PRAVIN N PATEL Area Code & Daytime Telephone Number Name of Contact Person 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 Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



CCFS GULF COAST INC

15 FEB -9 PM 2: 00

(Name of Corporation as currently filed with the	Florida Dept. of State)
P12000102289	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5230 W HWY 98
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	PANAMA CITY, FL 32401
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 ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
(Cit	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	
Signature of New Registered	d 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 = 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.

X Change	PT Joh	n Doe			
X Remove	<u>V</u> <u>Mil</u>	Mike Jones			
X Add	<u>SV</u> <u>Sal</u>	ly Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	PERRY TACKETT	5230 W HWY 98		
Add			PANAMA CITY FL 32401		
Remove					
2) Change	PS	GLEN DUNCAN	616 E WOODRUFF DR		
Add			BATON ROUGE LA		
Remove			70808		
3) Change	PS	SHANA REISSIG	9550 WAHRENBERGER R		
Add			CONROE TX 77301		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	(Be specific)
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f an amandment provides for an aval	ange replacification or cancellation of icoved shows
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of its an analysis of the angendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

	SECRETARY OF STATE SECRETARY OF STATE BIVISION OF CORPORATIONS	
The date of each amendment(s) adoption:	BIVISION OF COURT	, if other than the
date this document was signed.	о ри 2: 00	
Effective date if applicable:	15 FEB -9 PM 2: 00	
	e than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ON	<u>E</u>)	
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sharehold must be separately provided for each voting group ent		
"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 d action was not required. The amendment(s) was/were adopted by the incorporat action was not required.		
Dated 12/30/2014 Signature Parry Ack		
(By a director, president or ot	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)	
PERRY TACKE		
(Ту	ped or printed name of person signing)	
VP		
	(Title of person signing)	