## P13000102043

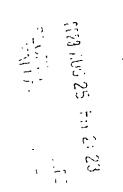
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

DOCUMENT N	UMBER: P13000102043	
The enclosed Arti	icles of Amendment and fee are	submitted for filing.
Please return all c	orrespondence concerning this r	natter to the following:
	NICHOLAS ELLIOTT	
		Name of Contact Person
	COASTAL DEVELOPME	ENT CORPORATION
		Firm/ Company
	8532 S US HWY 1	
	<del></del>	Address
	PORT ST LUCIE, FL 349:	52
		City/ State and Zip Code
	NE5305000@GMAIL.CO	M
	E-mail address: (to be	used for future annual report notification)
For further inforn	nation concerning this matter, pl	ease call:
NICHOLAS ELLIOTT		at (772 ) 530-5000
Name of Contact Person		Area Code & Daytime Telephone Number
		le payable to the Florida Department of State:

Certified Copy

enclosed)

(Additional copy is

Mailing Address

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

Certificate of Status

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certificate of Status

Certified Copy (Additional Copy

is enclosed)

1 1

## Articles of Amendment to Articles of Incorporation of

COASTAL DEVELOPMENT CORPORATION

(Name of Corporation as curre	itly filed with the Florida D	ept. of State)	
P13000102043			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporation	adopts the fo	llowing amendment(s)
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.s.	A professional corporation		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )			
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 adnew registered agent and/or the new registered office addresses.		name of the	
Name of New Registered Agent	·		
			1693 AUV
(Florida )	street address)		. 2
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>		22
I hereby accept the appointment as registered agent. I am familia	with and accept the obligati	ons of the pos	ition.
Signature of New	Registered Agent, if changing	<del></del>	<del></del>
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	· · · · · · · · · · · · · · · · · · ·		

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)

Example:

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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	SV	NICHOLAS ELLIOTT	8532 S US HWY 1
Add			PORT ST LUCIE, FL 34952
Remove 2) X Change	P	ALEXANDER ELLIOTT	8532 S US HWY 1
Add			PORT ST LUCIE, FL 34952
Remove 3 ) Change	VP	EUGENE SANTORO	8532 S US HWY 1
Add			PORT ST LUCIE, FL 34952
X Remove			
4) Change			
Add Remove			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary). (Be specific)	
	<del></del>
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exchange, reclassification, or cancellation of i	ssued shares,
rovisions for implementing the amendment if not contained in the amendmen (if not applicable, indicate N/A)	nt itself:
лу пол аррисате, такше голгу	
	<u>, , , , , , , , , , , , , , , , , , , </u>
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The date of each amendment(s) adoption: date this document was signed.	_, if other than th
Effective date if applicable:  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
Dated 8/7/23 Signature MMMM (AHA)	
(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)	-
Nicholas Elliott	336
(Typed or printed name of person signing)	الله ع: الله الله
$\subseteq$ S $\bigvee$	Ju 2:
(Title of person signing)	
	1 2: 23