P1400000391

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Amend (1) 1.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: COCO Pa	Im Properties,	Inc
DOCUMENT NUMBER: P1400000	391	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Victoria M Ada	air	
	Name of Contact Person	1
Coco Palm Pr	_	
	Firm/ Company	
135 Weston R	ld #216	
	Address	
Weston, Florid	da 33326	
	City/ State and Zip Cod	e
vmadair@amail a	nom	
vmadair@gmail.c		
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	ase cail:	
Victoria M Adair	954	. 336-1617
Name of Contact Person	Area Co	336-1617 de & Daytime Telephone Number
Enclosed is a check for the following amount made		
■ \$35 Filing Fee & Certificate of Status	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	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SECRETALED ON STATE ON OF CORPORATION	e jen
14 JAN CHREORATION	į».
14 JAN 14 PM 4: 15	

Coco Palm Properties, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P14000000391 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." _N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 = 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>	Name	Address
1) Change	V	William J Barrett	135 Weston Rd #216
Add			Weston, Florida
Remove			33326
2) Change		<u> </u>	**************************************
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	 		
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Article al sheets, if necessary).	(Be specific)		
N/A				
	<u></u>	 		
		 		
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	- A		11	c
rovisions for	nt provides for an exchan implementing the amend	ment if not contain	ed in the amenda	or issued snares, ient itself:
(if not apr	licable, indicate N/A)			
· FF				
N/A	<u> </u>			
N/A				

The date of each amendment(s) addate this document was signed.	option:	, if other than the
ū		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	93	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 1/8/2014		
Signature	Melen	_
	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	
\	/ictoria M. Adair	
-	(Typed or printed name of person signing)	
ŗ	President	
-	(Title of person signing)	