P14000076197

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ation: <u>East Coc</u> er: <u>P140000</u>	ST Acontray And 1 76197	water proofing	INC
The enclosed Articles of	of Amendment and fee are sub	mitted for filing.		
Please return all corresp	condence concerning this man	er to the following:		
•	Alicia	Name of Contact Person		
-		Firm/ Company		
-	4160 Ni	A. Arbanya	tc 21	
-	Bora T	City/ State and Zip Code	13/	
<u></u>	E-mail address: (to be us	ed for future annual report notification)	ul. Cem	
For further information	concerning this matter, pleas	call:		
Hilian	o Queiroz	at (SE) 400 Area Code & Daytime T	-4023	
Name o	f Contact Person	Area Code & Daytime	l'elephone Number	
Enclosed is a check for	the following amount made p	ayable to the Florida Department of State	:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) S52.50 Fill Certified Copy (Additional is enclosed)	of Status Copy at Copy	
Mai	ling Address	Street Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee. FL 32301

Articles of Amendment

	Articles of Incorporation	14 007 -6	hu 15. 2.
E. D	of	Jares pronfing	
Last Coast Pan	ting and 1	Water Pronting	Inc.
Name of Corporation as currently		o(State)	
P 14000			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profi	1 Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cow word "chartered," "professional association," or the	rp," "Inc," or "Co". A prof	y," or "incorporated" or the al essional corporation name must o	The new obreviation contain the
B. Enter new principal office address, if applicat (Principal office address MUST BE A STREET AL			
			•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>		
D. If amending the registered agent and/or regist new registered agent and/or the new registered	tered office address in Florided office address;	a, enter the name of the	
Name of New Registered Agent Al	CIA QUEITA	<u>}</u>	
416	C /UW 151 / (Florida street oddress)	Ave Suite 21	
New Registered Office Address: Bocs	(City)	Florida 3343) (Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	lepistered Agent: I am familiar with and acce New Registered Agent, if chan	· · · · · · · · · · · · · · · · · · ·	

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:

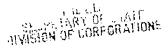
P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would 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	PT Joh	n Doe	
X Remove	Y Mil	ke Jones	
_X Add	SV Sal	ly Smith	
Type of Action (Check One)	<u>Tide</u>	Name	Address
1) Change	<u>VP</u>	Hiliano Queiroz	4160 NW 15+ AVE
Add			Suite 21
Remove			Bora Revar Fr 30431
2) Change	P	Alicia Queiroz	Boca Rever Fr 33431 4160 Wi 15+ Ave
X_{\perp} Add			Suite 21
Remove			Boca Raton 12 33431
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach addition	addine additional al sheets, if necessa	ry). (Be specif	inange(s) here: ic)		
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in amendme rovisions for (if not app	nt provides for an implementing the licable, indicate N/	exchange, recla amendment if n A)	ssification, or ca ot contained in	ncellation of issue the amendment its	d shares. elf:
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The date of each amendment(s) adoption	14 OCT -6 PM 12: 31	, if other than the
date this document was signed.	14 001	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes east for the amendment(s) t for approval.	
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statement 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)	
□ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shareholder	
action was not required.	y the incorporators without shareholder action and shareholder	
Dated 10 - 1	-2014 Town	
		_
selected by a	president or other officer – if directors or officers have not been n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
•	Hiliano Quelloz	
	(Typed or printed name of person signing)	
	VICE President (Title of person signing)	~~
	(Title of person signing)	