# P15000 044 093

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### COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: \_\_\_\_\_ Gulf Coast Rentals & Property Management, Ic.

DOCUMENT NUMBER: P15000044093

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela Jackson

Name of Contact Person

Gulf Coast Rentals & Property Management, Inc.

Firm/ Company

17814 Meridian Blvd.

Address

Hudson FL 34667

City/ State and Zip Code

gcrpm@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tailahassee, FL 32314

 Pamela Jackson
 at (<sup>727</sup>)
 863-1031

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

ES43.75 Filing Fee & Certificate of Status (الدط 4790 ريارية الا S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address

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

### Articles of Amendment to Articles of Incorporation

of

of GULF COAST RENTALS & PROPERTY MANAGEMENT, INC.		2019 DEC 27 AM 11: 2	
		ly filed with the Florida Dep	
( <u>Name o</u>	P1500004		<u></u> ,
		of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:			adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
NA			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation	"" or the abbreviation "Corp" name_must_contain_the_word
B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>		NA	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		NA	
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the n	ame of the
new registered agent and/or the new	v registered office addres	<u>88:</u>	<u></u>
Name of New Registered Agent	NA		
	(Florida s	treet address)	
<u>New Registered Office Address:</u>	NA		, Florida
men negative office address.	······	(City)	(Zip Code)

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam 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)

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.

X Change ΡT John Doe V. X Remove Mike Jones <u>X</u> Add SV. Sally Smith Type of Action Title Name Address (Check One) VSD Pamela Jackson 17814 Meridian Blvd 1) Change Hudson FL 34667 \_\_\_\_ Add Х Remove VS. Cathryn Jackson 8513 Berkley Drive 2) \_\_\_\_ Change  $X_{\rm Add}$ Hudson FL 34667 \_\_\_\_ Remove 3) \_\_\_\_ Change Add 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_\_ Add \_\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove Page 2 of 4

## E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

<ul> <li>F. If an amendment provides for an exchange, reclassification, or cancellation of issued s provisions for implementing the amendment if not contained in the amendment itself         (if not applicable, indicate N/A)</li> <li>NA</li> </ul>	<u>hares,</u> [: -
Page 3 of 4	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
	1 · · ·

(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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- □ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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

bv	NA	
-	(voting group)	

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dec 23, 2019 Dated Signature (By a director, president or other officer - if directors or officers have not been

(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)

Wayne H Jackson

(Typed or printed name of person signing)

Treasurer

(Title of person signing)