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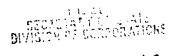
Jun 3 2015 Clemb

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EAST COAST M	MOVING AND STORAGE INC.
DOCUMENT NUMBER: P15000044607	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
ITAMAR FRIEDMAN	
	Name of Contact Person
EAST COAST MOVING A	AND STORAGE INC
	Firm/ Company
1945 SOUTH OCEAN DRI	
	Address
HALLANDALE, FL 33009	
	City/ State and Zip Code
	Only State and Zip Code
ITAMAR_999@YAHOO.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, plea	ase call:
ITAMAR FRIEDMAN	305 305-3712
Name of Contact Person	at (305) 305-3712 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



EAST COAST MOVING AND STORAGE INC

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000044607	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
EAST COAST MOVE INC.	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	d "corporation." "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered Name of New Registered Agent	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
HEN REGISTERED OFFICE MULICION.	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>xistered Agent:</u> I am familiar with and accept the obligations of the position.
Sign	ature 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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add .			
Remove			
2) Change		_	
Add			
Remove			
3) Change			resident and the control of
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			



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an amendmen	nt provides for an e	xchange, reclas	ssification, or ca	ncellation of iss	ued shares,	
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<u>provis</u> ions for i	nt provides for an e implementing the a icable, indicate N/A	mendment if n	ssification, or ca ot contained in	ncellation of iss the amendment	ued shares, itself:	
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The date of each amendment(s) as	lantion:	ners Table	if other than the
date this document was signed	Topsion:	CIVIS TX III	111 , C. S
5/21	/15	٠٠٠ الو	am 9: 46
Effective date if applicable:		15 MAY 27	HU >
	(no more than 90 days afte	r amendment file date)	
Note: If the date inserted in this be document's effective date on the De	plock does not meet the applicable statute partment of State's records.	ory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of ifficient for approval	f votes cast for the amendment(s)	
	proved by the shareholders through voting each voting group entitled to vote separa		
"The number of votes cast	for the amendment(s) was/were sufficient	t for approval	
by		,"	
···	(voting group)		
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without sh	archolder action and sharcholder	
■ The amendment(s) was/were add action was not required.	opted by the incorporators without shareh	older action and shareholder	
5/21/15	·	_	
Dated			
Signature	Hany		<u> </u>
(By a d	firector, president or other officer – if dire	ectors or officers have not been	
	d, by an incorporator – if in the hands of ted fiduciary by that fiduciary)	a receiver, trustee, or other court	
αρμοιτι	ned nadelary by that nadelary)		
	ITAMAR FRIEDMAN		
	(Typed or printed name of pe	erson signing)	
	PRESIDENT		
	(Title of person s	rigning)	