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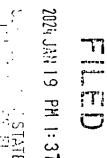
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EMERACO COAST TOOLS
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Oldenburg Name of Contact Person EMERALS COAST TOOCS Firm/ Company
315 Pine Moss Dr. Address
Fort Walter Beach FL 32548 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Oldenburg at (850) 979-4845 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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation

of

EMERALD COAST TOOLS INC. FILFD
(Name of Corporation as currently filed with the Florida Dept. of State)
2024 JAN 19 PM 1: 37
(Document Number of Corporation (if known), STATE Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new 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."
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)
(1 ft) that an ear man cost
New Registered Office Address: , Florida (City) (Zip Code)
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
Signature of New Negativrea Agent, if Changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e), F.S.

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 John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>VP</u>	Taylor Oldenburg	BIS Pine Mass Dr. Botwallor Beach, FL
X Add			Bot Walton Beach, FL
Remove			32548
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamoua			

	neets, if necessary). (
Hading	addition	al OFFIC			
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lf an amendment o	rovides for an exchan	nge, reclassificatio	on, or cancellatio	n of issued shares,	
provisions for imp	dementing the amend	lment if not conta	iined in the amen	dment itself:	
(іј пот аррисат	ble, indicate N/A)				
		_		<u>-</u>	
		<u></u> .			
	-			<u> –</u>	

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable: 1/7/24	
Effective date if applicable: 1/7/24 (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, t document's effective date on the Department of State's records.	his date will 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 shareholde action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s 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``	
by" (voting group)	
Dated	
Signature Maintephal Com	
(By a director, president or other officer - if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or other	er court
appointed fiduciary by that fiduciary)	
Christopher Oldenburg (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	