P150006/324

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	HON:	COASTAL	RECONS	TRUCTIO	ON GROUP,	INC.
	ST NUMBER: P15000061324					
The enclosed Articles of .						
Please return all correspo	ndence concerning (this matter to t	he followin	រដូ.		
		Seandsim	onic n	et ^v c-	an Simonio	
-re-resse P		ne of Conta		an Simonic	-	
•	Simonic. S	imonic,	Ratnec	ht & A	ssociates	, Inc.
Simonic, Simonic, Ratnecht & Associates, Inc. Firm/Company 8750 Perimeter Park Blvd.						
Address						
	Jackso	nville,	FL	32216		
		City	y/ State and	Zip Code		
	simoni	c@simoni	c.net			
	E-mail address: (=		ial report n	otification)	
For further information co	oncerning this matte	er, please call:				
Scot	t McCurdy		at (407)64 e & Daytime Tel-	4-1800
Name of Contact Person				Area Cod	e & Daytime Tel	ephone Number
Enclosed is a check for the	ne following amoun	t made payabl	e to the Flo	orida Depar	tment of State:	
S35 Filing Fee	□\$43.75 Filing I Certificate of S	Status C (A	43.75 Filing ertified Cop additional c nclosed)	ру	□\$52.50 Filing Certificate of Certified Cop (Additional C is enclosed)	Status Dy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327			Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314				2001 E.N	econive Celliel C	. II C IC

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

COASTAL RECONSTRUCTION GROUP INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P15000061324 (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 appreviation "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 <u>MUST BE A STREET ADDRESS</u>) 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: . 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

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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	P	Scott McCurdy	744 Industry Rd
X _ Add			Suite B
Remove			Longwood, FL 32750
2) Change			
Add			
Remove			
3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

	les, enter change (Be specific)				
					
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provisions for implementing the amen	ange, reclassificand ment if not con	ntained in the am	endment itself:		
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provisions for implementing the amen	ange, reclassific	ntained in the am	endment itself:		

The date of each amendment(s) adoption:date this document was signed.	. if other than the
_	
Effective date if applicable: (no m	ore than 90 days after amendment file date)
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
☐ The amendment(s) was were adopted by the shareholders was were sufficient for approval	
The amendment(s) was were approved by the shareh- must be separately provided for each voting group of	
"The number of votes east for the amendment(-	s) was/were sufficient for approval
by	
The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder
The amendment(s) was were adopted by the incorporaction was not required.	rators without shareholder action and shareholder
Dated 11-11-15	a S
(By a director, president or	other officer - if directors or officers have not been r - if in the hands of a receiver, trustee, or other court fiduciary)
So	cott McCurdy
(Typed o	or printed name of person signing)
PI	resident
*************************************	(Title of person signing)