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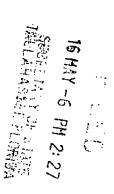
(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 5, 2016

BERNARD WILLIAMS 221 W HALLANDALE BEACH BLVD HALLANDALE BEACH, FL 33009-5441

SUBJECT: COAST TO COAST SALES & MARKETING, INC.

Ref. Number: P15000063456

We have received your document for COAST TO COAST SALES & MARKETING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 1 is missing from the document. Please find enclosed and complete the missing page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 416A00006932

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: COAST TO COAS	ST SALES & MARKET			
DOCUMENT NUMBER: P15000063456					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	spondence concerning this ma	tter to the following:			
	BERNARD WILLIAMS				
	Name of Contact Person				
	COAST TO COAST SALES & MARKETING				
		Firm/ Company			
	221 W HALLANDALE BEACH BLVD				
		Address			
	HALLANDALE BCH, FL	33009-5441			
		City/ State and Zip Cod	e .		
harne	ardwilliams75@ gmail.com				
- Oct III		sed for future annual report	notitiestion)		
	12-mail address. (to be de	ed for facure annual report	·		
For further information	n concerning this matter, pleas	se call:			
BERNARD WILLIA	MS	786	597-4240		
	of Contact Person	at (786 - Area Co)		
Name	or Contact reison	Aica Co	de & Daytime Telephone (Value)		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.O	endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation

16 HAY -6 PM 2: 27

SECRETARY OF STATE

	of			4FELA	nASSt E FLUKES
COAST TO COAST	SA(ES A	1 Em	WARRETIA	ムエハ	JC.
(Name of Corpo	oration as currently	y filed wi	th the Florida Der	ot. of State)	
P 150000 63456	>				
(De	ocument Number of	f Corporat	ion (if known)		
Pursuant to the provisions of section 607.1006, FI its Articles of Incorporation:	orida Statutes, this I	Florida P	rofit Corporation (adopts the fo	llowing amendment(s)
A. If amending name, enter the new name of the	he corporation:				
					The new
name must be distinguishable and contain the "Corp.," "Inc" or Co.," or the designation "Coword "chartered," "professional association," or	Corp," "Inc," or "C	'Co" A p	pany," or "incorp professional corpoi	oorated" or ration name	the abbreviation must contain the
B. Enter new principal office address, if applic					
(Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u>)				
C. Enter new mailing address, if applicable:	E BOV)				
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>: BOX</u>)				
				·-··	
D. If amending the registered agent and/or reg	vistamed office addr	race in Fl	reids antar the no	ıme of the	
new registered agent and/or the new register			mida, enter the na	unc or the	
Name of New Registered Agent					
Hume of them Registered rigem					
	(Florida stre	reet addres			
	(*		•	en in	
New Registered Office Address:		(Citv)		, Florida	(Zip Code)
		,			
New Registered Agent's Signature, if changing	Registered Agent:	<u>:</u>		of the man	idian
I hereby accept the appointment as registered ago	eni. I am Jamiliar w	wiin and a	ccepi ine obligatio	ns oj ine pos	mon.
	Signature of New R	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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SECT	PATRICIA JACKSON	815 N W 5th TERRACE
X Add			HALLANDALE BCH, FL 33009
Remove			•
2) Change			,_
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption: Debuty. 2 : 20/1	6, if other than the
· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable: Jebusy 3, 20/6 (no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	v filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of very by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting graust be separately provided for each voting group entitled to vote separate.	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	cholder action and shareholder .
The amendment(s) was/were adopted by the incorporators without sharchold action was not required.	der action and shareholder
Signature Signature Bua Culleans (By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	
(Typed or printed name of person	on signing)
(Title of person sign	ning)