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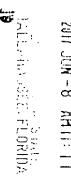
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C. GOLDEN
JUN 1 4 2017

COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION: MSRCOASTACING
OCUMENT NUMBER: P 17 0000 4122
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
ROD LARSON
Name of Contact Person
XPZESS
1511-B DENMAN RD Address
Address
SACKSOPULLE BRUCK FL 32250
City/ State and Zip Code
Address SACKSONVILLE BEACH FL 32250 City/ State and Zip Code Lee City/ State and Zip Code E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Rob LARGON at (904) 247 3/60 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
Status Certificate of
Mailing Address Amendment Section Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

<i>t</i>	9817 HH2 - Q 4 M 1 4 4
MYZ COASTAL LYC	2017 JUN - 8 AM II:
(Name of Corporation	as currently filed with the Florida Dept. of State)
211 0000 4/22	ALL ATTASSEE, FLORIDA
	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St ts Articles of Incorporation:	eatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	#2 STAUJUST, NE, FL 320
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	,
If amending the registered agent and/or registered new registered agent and/or the new registered office.	
Name of New Registered Agent	
.	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I at	ered Agent: m familiar with and accept the obligations of the position.
Signatu	re 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 Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add		_		
Remove				
4) Change		_		
Add				
Remove				-
5) Change				
Add		_	_	
Remove				
6) Change		_		
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If amending or adding additional Ar Attach additional sheets, if necessary).			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)				
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	f an amendment provides for an eve	hange reclassification or car	reellation of issued shares	
	provisions for implementing the am	endment if not contained in th	ne amendment itself:	
	(if not applicable, indicate N/A)			
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			-	
				
		V		

The date of each amendment(s) adop date this document was signed.	tion:	, if other than th
Effective date if applicable:		
ratetive date ir applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this tment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendme ient for approval.	ent(s)
The amendment(s) was/were approximust he separately provided for each	ed by the shareholders through voting groups. The following statch voting group entitled to vote separately on the amendment(s).	emeni
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareho	older
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
selected, b	tor, president or other officer – if directors or officers have not be y an incorporator – if in the hands of a receiver, trustee, or other offiduciary by that fiduciary)	en court
	(Typed or printed name of person signing)	
_	(Title of person signing)	