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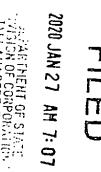
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FEB 2 2 2020 S. YOUN

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: WStu 6 DOCUMENT NUMBER: P17000	1au Anderson, PA
The enclosed Articles of Amendment and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the	following:
	Gay Hamson of Contact Person
CMStal Gi	ais Anderson, DA
1189 US HWUF	rm/ Company 21 S
Sebrina a	Address 33870 State and Zip Code
•	_
CMS+Waai Sell E-mail address: To be used for fut	sagmail.com
E-mail address. To be used for full	ure annual report notification)
For further information concerning this matter, please call:	
Onystal Gail Harrison	at (843, 214-9088
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:
Certificate of Status Certificate (Additional Certificate of Status)	75 Filing Fee & S2.50 Filing Fee fied Copy Certificate of Status Certified Copy sed) (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)

P 17 0000 G	1030
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>FI</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: COUSTAL GAIL SELLS. 1A	The new
name must be distinguishable and contain the word "corporation," "cor". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A proceed," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1843 US Hwy 27 N Sebnog 11 33870
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1843 US Hwy 27 N Sebung 19 33870
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	. 112
Name of New Registered Agent Wysta Gau	1 Harrison 1 21 N
New Registered Office Address: Sebning (C.	Florida 33870 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e	ALL AND SEEL FLORING SEEL FLORING OF STEAM TO DESCRIPTION OF STEAM TO DESCRIPT

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)

Example:

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.

X Change	<u>PT</u> <u>John l</u>	<u>Doe</u>	
X Remove	V Mike	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P, D	Crystal Gail Andersu	n 5110 Lakewood R
Add			Sebring 4 30878
Remove 2) Change	DID	Crystal Gail Harrison	1843 US Hwy 27 N
Add Remove 3) Change			Septing 11 258 10
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 NA)		ects, if necessary).	(Be specific)				
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)							
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder	
Signature By a directed by appointed fi	d by the incorporators without shareholder action and shareholder Word was a shareholder action and shareholder action and shareholder Word was a shareholder action and shareholder Word was a shareholder action and shareholder Word was a shareholder action and shareholder action acti	