P17000062988

(Requ	estor's Name)	
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(City/s	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	ļ





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	Il Drilling Inc.			
DOCUMENT NUMI					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Cheryl L. Boucino				
	Name of Contact Person				
	Treasure Coast Well Drilling Inc.				
	Firm/ Company				
	901 Boston Ave				
		Address			
	Fort Pierce, FL 34950				
	City/ State and Zip Code				
	treasurecoastwelldrilling@gmail.com				
	E-mail address: (to be us	ed for future annual report r	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Cheryl L. Boucino		at (925-5131		
Name	of Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depar	rtment 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation

1.27 7 2 1 210

Treasure Coast Well Drilling Inc.

(Name of Corporation as cu	irrently filed with	the Florida Dept. of	State)
P17000062988		1. 4	
(Document Nur	mber of Corporation	n (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Proj</i>	fit Corporation adop	ts the following amendmen
A. If amending name, enter the new name of the corporati	<u>ion:</u>		The new
name must be distinguishable and contain the word "corporatio" "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A profession	r "incorporated" or al corporation nam	the abbreviation "Corp.,"
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 new registered agent and/or the new registered office a		da, enter the <u>name</u>	of the
Name of New Registered Agent			
			, <u> </u>
(Flo	orida street address)		
New Registered Office Address:	(City)	F	lorida
	(2.4)		,
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and occ	evt the obligations o	f the position.
i nevery accept the appointment as regimered agent. I am just		eprono omagamma <u>.</u>	, ,
Simuture of	New Registered Ag	rent if changing	······································
Signature of	The meginiered Mg	sem, y enunging	
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.

X Change	<u>PT</u> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	V	Richard A. Marl	6725 12th St.
1) Change X Add			Vero Beach, FL 32966
Add			772-473-0940
2) Change			
A dd			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
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Attach additional sheets, if necessary).	(Be specific)			
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If an amendment provides for an exc	enange, reclassificat	toined in the amend	iment itself:	
provisions for implementing the am	tendinent ii not con	tarnes in the union		
provisions for implementing the am				
(if not applicable, indicate N/A)				
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The date of each amendment(s) addate this document was signed.	loption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file da	re)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the a fficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	-
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
12/28/2021 Dated Signature	Al Bura	
()	rector, president or other officer – if directors or officers hav l, by an incorporator – if in the hands of a receiver, trustee, o	
appoint	ed fiduciary by that fiduciary)	
	Cheryl L. Boucino	
	(Typed or printed name of person signing)	, _
	President	
	(Title of person signing)	



STATE OF FLORIDA WATER WELL CONTRACTOR LICENSE

Issued to

Richard Marl

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
License: 7462 Expires: July 31, 2023

Westing A. Centin

RICHARD IS OUR LICENCED WELL DRILLER