P1800039634

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COVER LETTER

TO: Amendment Section Division of Corporations

GULF COAST OFFICE PRODUCTS INC. NAME OF CORPORATION:
P18000039634
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHAEL O JOHNSON
(Name of Contact Person)
GULF COAST OFFICE PRODUCTS INC.
(Firm/ Company)
5227 SOUNDSIDE DRIVE
(Address)
GULF BREEZE, FL.UN 32563
(City/ State and Zip Code)
mike@ecop.biz
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICHAEL O. JOHNSON 850 677-8455
(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:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Gulf Coast Office Products Inc.	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P18000039634	
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:
Emerald Coast Office Products Inc.	The new
	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	4315 Gulf Breeze Pkwy.
(Principal office address MUST BE A STREET ADDRES	Gulf Breeze, Florida 32563
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4315 Gulf Breeze Pkwy.
	Gulf Breeze, Florida 32563
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
N/A Name of New Registered Agent	
Name of New Registerea Agent	
	Florida street address)
Non-Buriet and Office Address	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
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 X_Remove X_Add	PT John I V Mike . SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Classes			
) Change			
Add			
Remove			
Change			
Add			
Remove			
		m	

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is 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 votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust he separately provided for each voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	er
9-10-2018	
Dated	
Signature My Signature	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Michael Johnson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

Name and address change of Gulf Coast Office products (P18000039634) to new name Emerald Coast Office Products Inc. 4315 Gulf Breeze Pkwy. Gulf Breeze, Florida 32563. Contact phone number is (office) 850-677-8455 or cell (850)232-8124.

Thank you,

Michael Johnson