P1900012999

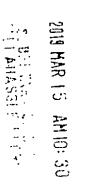
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: GULF COAST ASS	OCIATES, INC.	<u></u>
DOCUMENT NUMBER	: P1900001299		
The enclosed Articles of A	mendment and fee are sub	nitted for filing.	
Please return all correspon	dence concerning this matte	er to the following:	
TEI	RRY L. DONNA		
		Name of Contact Person	n
GU	LF COAST ASSOCIATES	, INC.	
	- · · · ·	Firm/ Company	
254	I I GALASHIELDS CIR		
	·	Address	
ВО	NITA SPRINGS FL 34134	-1969	
		City/ State and Zip Cod	e
gulfeoasta	ussociates@comcast.net		
	E-mail address: (to be used	d for future annual report	notification)
For further information co	ncerning this matter, please	call:	
TERRY L. DONNA		at (<u>239</u>	948-3955
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made pa	yable to the Florida Depa	artment of State:
S35 Fixing Fee	S43.75 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)
	Address		Address
Amendment Section			Iment Section
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

GULF COAST ASSOCIATES, INC.

				₹3 .
(Name of Corpo	ration as currently filed with the Florida Dept.	of State)	F	1.
P1900001299				موديد موديد
(D	ocument Number of Corporation (if known)	·		1 5
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corporation</i> add	opts the fol	llowing ar	nendmen
A. If amending name, enter the new name of the	ne corporation:			
			Th	ie new
	word "corporation," "company," or "incorpor Corp," "Inc," or "Co". A professional corporat the abbreviation "P.A."			
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE				
· -				
D. If amending the registered agent and/or registered agent and/or the new registered.	istered office address in Florida, enter the nam red office address:	e of the		
Name of New Registered Agent	·		 _	
	(Florida street address)			
	·	()		
New Registered Office Address:	(City)	Florida	(Zip Code	e)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: nt. I am familiar with and accept the obligations	of the pos	ition.	
	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	<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>	Address
1) Change	D	KEVIN YANKO	19465 LA SERENA DR STE 2
X Add			FORT MYERS FL 33967
Remove			
2) Change			
Add			
Remove			
3) Change			·-·
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damaya			

icle III is amended to refle	ect a professional corporation for the conducting of both commercial and residential real
state services to the public.	This corporation will act as an "S" corporation for the purposes of IRS filings.
	
	
	
If an amendment provide	s for an exchange, reclassification, or cancellation of issued shares,
provisions for implement	ting the amendment if not contained in the amendment itself:
(if not applicable, ind	icale MA)
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	, if other than the
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, this document's effective date on the Department of State's records.	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.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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 shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated3/6/2019	
Signature	en ourt
TERRY L. DONNA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	