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R. WHATE JUN 23 2020

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: EMERALD COAST SCREENS INC. P 190000 84889 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VICTOR BRONKHORST

Name of Contact Person EMERAL) COAST SCREENS INC.

Firm/ Company

924 N 63 RD AVE

Address

PENSACQA, FL 32506

City/ State and Zip Code EMERALD COAST SCIEENS & GHAIL. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VICTOR BRONKHOKST at (850) 3568767

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 Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address

Amendment Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

_		O I	_	•	
EMERALD	COAST	SCNEZN	1200	-9 FX 2:10	
(Name o	f Corporation as cu	irrently filed with	the Florida Dept.	of State)	
f	190000 84 85	39			
	190000 84 88 (Document Nur	mber of Corporation	on (if known)	· · ·	
Pursuant to the provisions of section 607. Is Articles of Incorporation:					dment(s
A. If amending name, enter the new na	ime of the corporati	ion:			
				77	
ame must he distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	"orp," "Inc," or " ζ	o". A profession	or "incorporated" and corporation na	r the abbreviation "Cor me must contain the w	new p.," vord
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>			N/A		_
 Enter new mailing address, if applied (Mailing address MAY BE A POST COMPANY) If amending the registered agent and applied to the second second	OFFICE BOX)	ce address in Flor		ue of the	_ _ _
new registered agent and/or the nev	v registered office a	ddress:			
Name of New Registered Agent		N/A			
	(Flo	rida street address)			
New Registered Office Address:		NA	 -	Florida(Zip Code)	
New Registered Agent's Signature, if cl	hanging Registered	Agent:		tzip Code)	
hereby accept the appointment as regist	ered agent. I am far	miliar with and ac			
	^	V/A	gent, if changing		
	Signature of	New Registered A	gent, if changing		
Check if applicable The amendment(s) is/are being filed p	ursuant to s. 607.012	0 (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)

Remove

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> </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		VICTOR BRONKHORST	924 N 63 M) NE
X Add			PENSACOLA, R
Remove			39206
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u></u>
Add			

Attach <i>addi</i>	g or adding additional itional sheets, if necessa	ry). (Be specific)	cisi mere.		
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lf an aman	dment provides for an	orahongo roolassifia	stian or concellation	n of icenad charac	
provisions	s for implementing the	amendment if not con	ntained in the amen	dment itself:	
	applicable, indicate N//	4)			
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EMERALD COAST SCREENS INC.

924 N 63 RD AVE PENSACOLA FL 32506 850-356-8767

AMENDMENT SECTION DIVISION OF CORPORATION

06/01/2020

Dear Sir/Madam

Attached please find An amendment to the corporation for the addition of a vice president to the company.

Please note that this person is the son of the President and does have the same names

Trusting the above is in order

Regards

Victor Bronkhorst

President

850-356-8767

The date of each amendment(s) adoption:	JUNE	151	2020	, if other than the
date this document was signed.				
Effective date if applicable:	JUNE	1 22	2020	
	(no more than 90	days after	amendment file	date)
Note: If the date inserted in this block does to document's effective date on the Department of		ble statuto	ory filing require	ements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)			
The amendment(s) was/were adopted by the action was not required.	incorporators, or bo	oard of dir	ectors without sl	hareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		number of	votes cast for th	ne amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the ame	endment(s) was/were	sufficient	t for approval	
by				
(vo	ting group)			
DatedO6/c1	12020			
Signature	5	_		
(By a director, presselected, by an inc	sident or other office orporator – if in the y by that fiduciary)			
	VICTOR (Typed or printed na	BRON	K HO K ST	
	(Typed or printed na	ame of per	rson signing)	
	PRES De	ENT		
	(Title of person sign	ning)		