P20000005810

(Re	questor's Name)	-
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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02/23/21--01024--008 **35.00

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations -L EAST COAST CONSTRUCTION SERVICES, INC P200000058 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company NET WORK & AM ML.COM
address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

enclosed)

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(Additional Copy is enclosed)

Articles of Amendment

to

Articles of Incorporation

FILED

4.	of
FL EAST GOAST CONSTRUCTIO	IN SEK VOLUTEB 26LANCT: 33
(Name of Corporation as currently filed with the	Florida Dept. of State)
Pab 000005810	SEURETARY OF STATE TALL AHASSEE EL
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office addre	
·	<u></u>
Name of New Registered Agent	
(Florido	i street address)
New Registered Office Address:	Florida
(Ci	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent.
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signature of New Registered	d 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)

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 Doc 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>	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	P	GUSTANO Adulfo LARA SUAZO	2500 Springdile Blud
Add			Palm Spaings, FL 33461
Remove			Palm Spaings, FL 33461
2) Change		_	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

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.

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X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	\underline{V}	Mike Jor	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change	-	_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

The date of each amendment(s) adoption: 1 1 2001 date this document was signed.	if other than the
Effective date if applicable:	_
ono more than 90 days after amendment file dates	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was were sufficient for approval.	
☐ The amendment(s) was were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendments):	
"The number of votes cast for the amendment(s) was were sufficient for approval	
by	
☐ The amendment(s) was were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Jarquelen A Belin is	
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed figheiary by that fiduciary)	-
JACQUEINE A BETANCES (NE) Speed or printed name of person signing)	-a-
Resident	_
(Title of person signing)	