P2/0000 66240

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

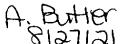
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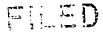


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Coastline Diving &	Marine, Inc		
DOCUMENT NUMI	P21000066240	<u> </u>		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Carolyn Ball, CPA			
	Name of Contact Person			
	Calypso Breeze Consulting, Inc			
	Firm/ Company			
	PO Box 15100			
	Address			
	Fort Pierce, FL 34979			
		City/ State and Zip Code		
	calypsobreezecpa@gmail.con	n		
	E-mail address: (to be us	ed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Caroyn Ball, CPA		at (392-7285	
Name of Contact Person		Area Cod	le & Daytime Telephone Number	
Enclosed is a check to	or the following amount made [payable to the Florida Depa	rtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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 Articles of Incorporation of



to

Coastline Diving & Marine Inc			7021 AUG 17 1	PM 12: 4/
(Name o	of Corporation as curre	ently filed with the Florida De		
P21000066240			TALLA 10	OF STATE
	(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, t	his Florida Profit Corporation	adopts the following ar	mendment(s
A. If amending name, enter the new na	ame of the corporation	<u>:</u>		
n/a			77	he new
name must be distinguishable and contain "Inc" or Co" or the designation "C "chartered." "professional association.	Corp, " "Inc," or "Co".	. A professional corporation		
B. Enter new principal office address,	if applicable:	n/a		
(Principal office address MUST BE A S		-		
				
		 		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)		PO Box 15100		
		Fort Pierce, FL 34979		
				
D. If amending the registered agent an new registered agent and/or the new			ame of the	
Name of New Registered Agent	Carolyn Ball, CPA			
	401 Trowbridge Road			
	(Florida	a street address)		
New Registered Office Address:	Fort Pierce, FL		. Florida 34945	
A THE STATE OF THE		(City)	Zip Code	۳)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ag	ent:	ane of the position	
Thereby uccept the approximent as region	erea ageni. Tam jamin	ar wan und deeeprone oongan	ms of the position.	
	Bul			
	Signature of Ne	Registered Agent, if changing	,	
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)

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 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>	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>	<u>Addres</u> s
1) Change	VP	Carolyn Ball	PO Box 15100
X Add			Fort Pierce, FL 34945
Remove			
2) Change	VP	Payne Liotta	PO Box 15100
Add			Fort Pierce, FL 34945
X Remove 3.) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attac!	nending or adding additional Articles, enter char ch additional sheets. if necessary). (Be specific)	ige(s) nere.		
v∕a				
_			-	
				
				. =-
. <u>lf an</u>	n amendment provides for an exchange, reclassif	cation, or cancellation	of issued shares,	
prov	ovisions for implementing the amendment if not of (if not applicable, indicate N/A)	ontained in the amendi	nent itself:	
ı/a				
			-	
	<u> </u>			<u></u>
		· · ·		

	07/31/2021	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requestrement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for ufficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The reach voting group entitled to vote separately on the an	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
08/04/I Dated	021	
Signature <u>UK</u>	firector, president or other officer – if directors or office	
select	firector, president or other officer – if directors or office, ed, by an incorporator – if in the hands of a receiver, trus inted fiduciary by that fiduciary)	rs have not been stee, or other court
	Alexander Russell	
	(Typed or printed name of person signing)	
	Incorporator	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·