P21000071080

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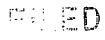
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Coastal Partners N	SSB, Inc.		
	1BER: P21000071080			
	s of Amendment and fee are su	abmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	Christopher S. Pollard			
		Name of Contact Perso	n	
		Firm/ Company		
	2422 S. Atlantic Avenue			
	Address			
	Daytona Beach Shores, FL.	32118		
		City/ State and Zip Cod	e	
	chris@chrispollard.net			
	E-mail address: (to be u.	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
Christopher S Pollar	d	at (236-0474	
Name of Contact Person		at (386) 236-0474 Area Code & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	\$43.75 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)	
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 to Articles of Incorporation of



Coastal Partners NSB, Inc.	2021 SEP 30 PM 3: 55
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
P21000071080	THE SEE SEE SE
(Досиг	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
Coastal Partners Real Estate Inc.	The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AD</u>	<u>e:</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>2X</u>)
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the loffice address:
Name of New Registered Agent	<u>. </u>
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	<u>vistered Agent:</u> I am familiar with and accept the obligations of the position.
Sign	nature of New 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)

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>	<u>John Do</u>	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional:	lding additional Art sheets, if necessary).	(Be specific)				
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f an amendment i	orovides for an exch	ande reclassifica	tion or cancella	itian of icenad	charac	
provisions for im	plementing the ame	ndment if not con	tained in the aπ	nendment itsel	f:	
(if not applica	ble, indicate N/A)				<u></u>	
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, t Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	lment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s)	tatement 1:
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
Dated	er 27. 2021	
selec	director, president or other officer – if directors or officers have not ted, by an incorporator – if in the hands of a receiver, trustee, or othe inted fiduciary by that fiduciary)	
	Christopher S Pollard	
	(Typed or printed name of person signing)	
	Owner	
	(Title of person signing)	