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7/6/2022

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Gulf Coast Living Real Estate Inc NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (to be used for future annual repor-For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

	ncorporation
Gulf Coast Living	
(Name of Corporation as curren	nty filed with the Florida Dept. of State)
P 22 0000 3	31138
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	at Estate Inc 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.z	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	3046 Del Prodo Blva S Cape Coral Fl 33904
C. Enter new mailing address, if applicable:	Suite 1C
(Mailing address MAY BE A POST OFFICE BOX)	Capo Coral H 33904
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	(City) . Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Ag  I hereby accept the appointment as registered agent. I am famili	ent: ar with and accept the obligations of the position.

Signature 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.

X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>ce Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP_	450 Cathey	3046 Da Prado Bluds
Add			Copa Coral F13390
2) Change	VP	Christopher Lynch	3046 Dalfrado Bluds Cape Cord H 3390
Add Remove 3) Change			Cape Cord N 3370
Add Remove 4) Change Add	<del></del>	<u></u>	
RemoveRemoveAdd			
Remove 6) Change Add	<del></del>		
_ Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)			
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	t	stina or consolle	stian of iccupal ch	arne
an amendment provides for an exc provisions for implementing the am	nange, reclassing	ntained in the ar	nendment itself:	ar co,
(if not applicable, indicate N/A)	endinent it not con	ttamed in the us		
(if not applicable, material viri)				
<u></u>				

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The date of each amendment(s) adoption: $\frac{-\frac{1}{2022}}{-\frac{1}{2022}}$ . if other than the
date this document was signed.
Effective date if applicable: 7/6/2022
Effective date if applicable: / 10/2000 (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 date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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 amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
_ / / / 2 / 2 / 2
Dated
Signature Colonia Signature
(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 fiduciary by that fiduciary)
$\mathcal{R}_{\mathbf{r}}$
(Typed or printed name of person signing)
C
Trasident / OWNER
(Title of person signing)