

P98000010849
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PRUDENTIAL PLAZA
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August 12, 1998

Secretary of State
State of Florida
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

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*****87.50 *****87.50

FILED
98 AUG 21 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: COASTLINE YACHT SALES, INC.

Dear Sirs:

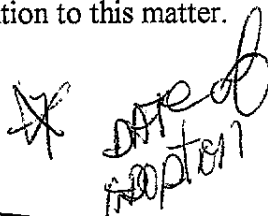
Enclosed please find an original and one copy of the Articles of Amendment for the above referenced corporation.

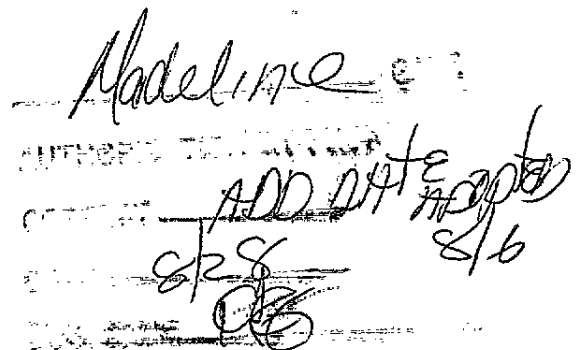
Also enclosed is a check in the amount of \$87.50, in payment of the \$35.00 filing fees and \$52.50 for one certified copy of the Articles of Incorporation. Please return same to me using the self-addressed, stamped envelope also enclosed.

Thank you for your prompt attention to this matter.

Very truly yours,


HARVEY L. RUBINCHIK
HLR:psw
Enclosures


Madeline


Madeline
ADD DATE 8/28
8/6


Madeline
8/20

ARTICLES OF AMENDMENT TO
ARTICLES OF INCORPORATION
OF
COASTLINE YACHT SALES, INC.

FILED
98 AUG 21 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provision of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its Articles of incorporation:

FIRST: Article I is amended to read as follows:

"The Name of the Corporation shall be COASTLINE FINANCIAL SERVICES, INC."

SECOND: The amendment was approved by the Shareholders. The number of votes cast for the amendment was sufficient for approval. The date of adoption is August 6, 1996.

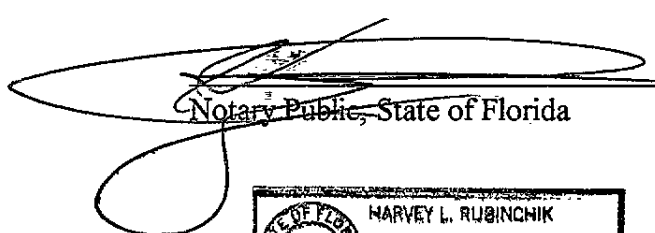
Signed this 11 day of AUGUST, 1998.


RAY LEQUERIQUE, President

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared WILLIAM JOHN WEST, to me known to be the person who subscribed his name to the foregoing instrument, and he acknowledged before me that he did subscribed thereto for the uses and purposes therein mentioned and set forth.

AUG WITNESS my hand and seal in the State and County set forth above this 11 day of Aug, 1998.


Notary Public, State of Florida

My Commission Expires:

Personally known X

Presented I.D. _____

Type of I.D. presented: _____

