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07/25/23--01021--016 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: GULF COAST DE	VELOPERS INC			
DOCUMENT NUM	D08000030310				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	WILLIAM ECKHOFF				
	Name of Contact Person				
	GULF COAST DEVELOPERS				
		Firm/ Company			
	26001 NOTRE DAME BLVI	D			
		Address			
	PUNTA GORDA FLORIDA 33955				
		City/ State and Zip Code	2		
	CINDYECKHOFF@GMAIL	COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
WILLIAM ECKHO	FF	941 at (380 9907		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check	for 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)		
Ar Di P.(ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassec, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations Entre of Tallahassec N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment of

	to
Articles of	Incorporation

(Name	of Corporation as currently	filed with the Florida Dept. of State)	
GULF COAST DEVELOPERS ,INC.	DOCUMENT NUMBRT - P	98000039319	
	(Document Number of C	Corporation (if known)	,
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation adopts the following	owing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contair "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	mpany," or "incorporated" or the abbre professional corporation name must co	viation "Corp.," ontain the word
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appl			
(Mailing address MAY BE A POST	OFFICE BOX)		FS7
			<u>ပ</u> ာ ·
			3
D. If amending the registered agent ar new registered agent and/or the new		ss in Florida, enter the name of the	30
	DOUGLAS R ECKHOFF		
Name of New Registered Agent	26004 NOTRE DAME BLV	D	
	(Florida stree	t address)	
V D	PUNTA GORDA	339	55
New Registered Office Address:		(iv) Florida	(7in Code)
	(0	Tiry)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		th and accept the obligations of the posit	ion.
	1100	W 9/1/1/1/	,
		istered 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		LINDA K ECKHOFF	26001 NOTRE DAME BLVD
Add				PUNTA GORDA FL 33955
Remove 2) Change	<u>T</u>	_	CINDY M ECKHOFF	26004 NOTRE DAME BLVD
X Add				PUNTA GORDA FL 33955
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	-

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this of Department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	t(s)
, ,	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
07-19-2 Dated Signature	1/2000 1/1	
(By	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator - if in the hands of a receiver, trustee, or other co ointed fiduciary by that fiduciary)	urt
	WILLIAM D ECKHOFF	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	