## P12000015290

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## COVER LETTER

**TO:** Amendment Section

**Division of Corporations** Backwater Marine & Auto, Inc. NAME OF CORPORATION: P12000075290 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tamara Mulconrey Name of Contact Person Backwater Marine & Auto Inc Firm/ Company 2020 NW 1st Place Address Cape Coral, Florida 33993 City/ State and Zip Code micky3351@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tamara Mulconrey Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Backwater Marine & Auto, Inc.					
(Name of Corporation as currently filed with the Florida Dept. of State) P12000075290					
	(Document Number	of Corporation (if known	own)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is <i>Florida Profit Corp</i>	oration adopts the followi	ng amendment(s) to	
A. If amending name, enter the new na Backwater Marine & Yacht Brokerage In				The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A profession		abbreviation	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		<b>NA</b>			
C. Enter new mailing address, if appli	cable:		TALLAL	ZOIGFEB	
(Mailing address <u>MAY BE A POST</u> (			975 977 979 970	TED 2	
D. If amending the registered agent an new registered agent and/or the new			er the name of the	19	
Name of New Registered Agent	NA			_	
	•	street address)		_	
New Registered Office Address:	NA	(City)	, Florida(Zip	Code)	
New Registered Agent's Signature, if cill hereby accept the appointment as regist			obligations of the position		
<u> </u>	Signature of Nev	v Registered Agent, if o	changing	_	

## 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:

1/2

(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>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	•
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u>v</u>	<del></del>		
Add				
Remove				
2) Change	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		-		
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)					
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<u>If an a</u>	mendment provides fo sions for implementing	r an exchange, recis	ssification, or can	cellation of issued	shares,
(i)	f not applicable, indicat	te N/A)	iot containtea in th	e amenument usen	<u>i</u>
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated 2 · 10 · 10	
Signature Jamora Mulconrey	
(By a director, president or other officer – itdirectors or officers have no	ot been
selected, by an incorporator – if in the hands of a receiver, trustee, or ot	ner court
appointed fiduciary by that fiduciary)	
Tamara Mulconrey (Typed or printed name of person signing)	
President	
Tresident (Title of person signing)	