P13000066525

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SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

08/26/13--01034--010 **35.00

C. LEWIS
SEP 3 2013
EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NORTH BA	Y MARINE GIF	T SHOP INC		
DOCUMENT NUMBER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	JENNY PEREZ				
		Name of Contact Person	1		
	NORTH BAY MARINE GIFT SHOP INC				
		Firm/ Company			
7601 EAST TREASURE DRIVE					
		Address			
	NORTH BAY VIL	LAGE, FL 3314	1		
City/ State and Zip Code					
nor	thbaymarinegiftsh	nop@gmail.com			
· 	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Andres Hurta	ido	at (305	, <mark>4238932</mark>		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ortment 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)		
Mai	ling Address	Street	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
	Box 6327 shassee, FL 32314		Building xecutive Center Circle		
1 4113	11103355, I'L 34314	2001 E	vecative Cetter Citeir		

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

FILED 13 AUG 26 PM 1: 26

NORTH BAY MARINE GIFT SHOP INC

SECRETARY OF STATE TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P13000066525 (Document Number of Corporation (if known) ment(s) to

Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	Florida Statutes, this Fl	orida Profit Corporation :	idopts the following amendmen
A. If amending name, enter the new name of	the corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	Corp." "Inc." or "Co	". A professional corpo	
B. Enter new principal office address, if apple (Principal office address MUST BE A STREET	icable:		
<u> </u>	,		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC	E BOX)		
D. If amending the registered agent and/or re	gistered office addres	s in Florida enter the na	me of the
new registered agent and/or the new regis	tered office address:	s m i tonda, enter the na	me of the
Name of New Registered Agent			_
	(Florida stree	t address)	-
New Registered Office Address:		Florid	
	(City)		(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag		h and accept the obligatio	ns of the position.

Signature of New Registered Agent, if 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:

(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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Junelly A. Sebastiano	7601 EAST TREASURE DRIVE
X Add			# CU4
Remove			NORTH BAY VILLAGE, FL 33141
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessary). (Be specific)		
•	• • •	
		
If an amandment analysis for an analysis	hanna analasista salaman analasis at salamat ahanna	
provisions for implementing the one	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	induction is not contained in the amendment usen:	
(y not applicable, malcale (VA)		
· · · · · · · · · · · · · · · · · · ·		

	loption:	, if other than the
date this document was signed.		FILED
Effective date if applicable:		, ILED
	(no more than 90 days after	amendment file date) 13 AUG 26 PH 1: 26
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	SECRETARY OF STATE TABLAHASSEE, FLORIDA
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of officient for approval.	
	proved by the shareholders through voting each voting group entitled to vote separat	
"The number of votes cast	for the amendment(s) was/were sufficient	for approval
by		."
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareho	der action and shareholder
Dated_08/19	9/2013	
selecte	lirector, president or other officer – if directly d, by an incorporator – if in the hands of a ted fiduciary by that fiduciary)	
	JENNY PEREZ	
	(Typed or printed name	of person signing)
	PRESIDENT	

(Title of person signing)