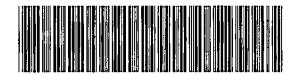
P14000081164

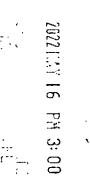
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

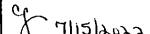
Office Use Only



300387608533

05/16/22 --01031--022 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: JSK Watersports o	f Florida Keys Inc				
DOCUMENT NUM	IBER: P14000081164					
The enclosed Articles of Amendment and fee are submitted for tiling.						
Please return all corr	respondence concerning this ma	tter to the following:				
	Debbie Norris					
	Name of Contact Person					
	William Norris, PA					
	Firm/ Company					
	134 Key Heights Drive					
		Address	_			
	Tavernier, FL 33070					
		City/ State and Zip Code	e			
	debbienuris_379@hotmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea	se call:				
Debbie Norris		at (305	998-9373			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

2022 HAY 16 PH 3: 00

JSK Watersports of Florida Keys Inc

(Name of Corporation as curren	itly filed with the Florida Dept. of State) : ;
P14000081164	in the second
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: A	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.A	A professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	_N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered AgentN/A	
	street address)
New Registered Office Address:	. Florida /Zip Coder
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia	
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)

Example:

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> </u>	John Doe	
\underline{X} Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	٧	William M Norris	134 Key Heights Drive
Add			Tavernier, Florida 33070
x Remove 2) Change	S	Deborah C Norris	134 Key Heights Drive
Add			Tavernier, Florida 33070
Remove Change			
Add			
Remove 4) Change			
Add			
Remove 5) Change			
Add		_	
Remove			
6) Change		_	
Add			
Remove			

N		(necessary) (B				
	/					
		-				· · · · · · · · · · · · · · · · · · ·
			····			
_						
	· -					
						· · · · · · · · · · · · · · · · · · ·
				1 5 4 16 ···		
					- 	
<u>f an ame</u>	<u>ndment provide</u> v fos implemen	s for an exchang	<u>e, reclassifications</u>	on, or cancellatio ined in the amed	n of issued shares	<u>.</u>
(if ne	т applicable, ind	licate N/A)	icin ii jiwa conta	med in the ame.	idirent haen,	
	NIA					
	_!					
-						
		····-				

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		1.
	(no more than 90 days after amendment file date)	1
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	is, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the am (ficient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
selecte	9 20 2. 2 My Mow rector, president or other officer – if directors or officers have 1, by an incorporator – if in the hands of a receiver, trustee, or officery by that fiduciary)	
#M.		
	WILLIAM M NORRIS	
	(Typed or printed name of person signing)	
	15	
	(Title of person signing)	