399162

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: The Scuba Club, In	nc.	
DOCUMENT NUM	200162		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	James F. Miller		
		Name of Contact Perso	n
	Miller Legal P.L.		
	4 Harvard Circle, Stc. 100	Firm/ Company	<i>*</i>
		Address	
	West Palm Beach, FL 33409	Address	
		City/ State and Zip Cod	ie
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call: at (⁵⁶¹	296-3252
Name	of Contact Person		ode & Daytime Telephone Number
	or the following amount made		
\$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)
Am Div P.C	illing Address endment Section rision of Corporations b. Box 6327 lahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

2015 NOV -9 AH 11:41

The Scuba Club, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) IF STATE 399162 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The West Palm Beach Scuba Club, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.

Example: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Dorothy May Campbell	30 Eastwinds Circle
Add X Remove			Tequesta, FL 33469
2) Change	PTD	Kerry Jacobs	12876 Calais Circle
X Add			Palm Beach Gardens, FL 33410
Remove			
3)Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			Address of the Control of the Contro
Ramova			

E. If amending or adding additional Articles, enter change(s) here:					
(Attach additional sheets, if necessary). (Be specific)					
N/A					
· · · · · · · · · · · · · · · · · · ·					
F. 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:					
(if not applicable, indicate N/A)					
N/A					

The date of each amendment(s) adop	October 21, 2015	-4 4 4
date this document was signed.	, if	other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	ck does not meet the applicable statutory filing requirements, this date will not be timent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated OU	,21, 2015	
Signature	Mr Chief	
(By a direc	ctor, president or other officer - if directors or officers have not been	
	y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
appointed	inductary by that inductary)	
Ke	erry Campbell Jacobs	
	(Typed or printed name of person signing)	
Dia	rector	
	(Title of person signing)	