486144

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	D MARINA INC.	
DOCUMENT NUMI	A Q A 1 AA		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Maria Bryant		
	The Haba Law Firm	Name of Contact Persor	1
		Firm/ Company	
	12420 Pebble Stone Court	• •	
		Address	
	Fort Myers FL 33913		
		City/ State and Zip Code	
	mariabryant@habalaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Maria Bryant		at (225	209-4700
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

LAKE TRAFFORD MARINA INC.

EARL FRAITORD MARIATING.	
(Name of Corporation as currently filed with the Florida Dept. of State)
486144	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	ollowing amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	reviation "Corp.,"
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(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:	
(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 po	sition. 12
	<u>ئ</u> ے:
	sition. 1921 JEE 27
Cinner of Vin Danis, and Control of the city	
Signature of New Registered Agent, if changing	P
Check if applicable	$\ddot{\wp}$
The amendment(s) is/are being filed nursuant 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.

· Example: X Change	<u>PT</u>	John Doe	
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	PTD	Edward R. Olesky	6001 Lake Trafford Road
Add			Immokalee FL 34142
X Remove			
2) Change	PTD	Edward Ronald Olesky Revocable Trust	6001 Lake Trafford Road
X Add			Immokalee FL 34142
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	idding additional Articles, enter I sheets, if necessary). (Be speci	fic)		
				
-				
				•
· · ·				
				
an amendmei	t provides for an exchange, recla	ssification, or cance	llation of issued shar	es.
provisions for	mplementing the amendment if i	not contained in the	amendment itself:	_
(if not appl	cable, indicate N/A)			
	<u></u>			
	····		.	
		_ ·		

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, this of document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	neni
"The number of votes cast for the amendment(s) was/were sufficient for approval	2021 JUL 27
by" (voting group)	<u></u>
	. 27
7/30/21	
Dated 7 00 01	P .
Signature	<u>స</u> . ట
signature of the selected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	5
Educard Ole8Ky (Typed or printed name of person signing)	<u>.</u>
(Title of person signing)	