536048

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07/26/2023



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Apalachicola Oyst	ter Works, Inc.	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Steve Watkins		
		Name of Contact Person	1
		Firm/ Company	
	41 Commerce St		
	Apalachicola, FL 32320	Address	
		City/ State and Zip Cod-	e
	smwiii@att.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call:	
Ben Watkins		at (850	、570-8718
Name	of Contact Person		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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation of

Aparacincola Oyster works, Inc.		
(Name of Corporation as currently 536048	filed with the Florida Dept. of State)	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The name
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbrevia professional corporation name must cont	The new ation "Corp.," ain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	23 JU!
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	14 12:11
Name of New Registered Agent	<u> </u>	_
		
(Florida stree	et address)	_
New Registered Office Address:	, Florida	p Code)
•	[2]	/ Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position	ı.
Signature of New Reg	gistered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (expression of the content of the con	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.

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)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	Sec	Theresa W. Linscott	1221 Woodmere Dr
X Add			Winter Park, FL 32789
Remove			
2) Change	Treas	Steve M. Watkins, III	2122 Stiles Pond Ct
X Add			Tallahassee, FL 32303
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding ad Attach <i>additional sheets, ij</i>	ditional Articl	(Re specific)	e(s) nere:		
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an amendment provides	for an exchar	nge, reclassificat	<u>ion, or cancellati</u>	ion of issued sha	ares,
rovisions for implement (if not applicable, indi	ing the amend	iment if not conf	tained in the ame	endment itself:	
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The date of each amendment(s) adoption: March 12, 2023 date this document was signed.	, if other than the
Effective date if applicable: March 22, 2023	
(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 t
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	der action and shareholder
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.	idment(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	statement 's):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by 100% of shareholders	
(voting group)	
April 27, 2023 Dated	•
Signature	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	t been ner court
Steve M. Watkins, III	
(Typed or printed name of person signing)	
(Title of person signing)	