F70025

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. (R€	equestor's Name)	
· (Ac	ldress)	,
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CAPT. VICKIS' ENTERRISES, INC.
DOCUMENT NUMBER: F70025
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VICTORIA R. IMPALLOMENT Name of Contact Person
CAPT. VICKIS' ENTERPRISES, INC
2 CORAL DR. Address
Key WEST, FL 33040 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VICTORIA IMPALIOMENT at (305) 745-990 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Sas Filing Fee Scrifficate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

CAPT. VICKI	s' Ei	NTERPRIS	SES,INC	, , , ,	k .
(Name of Corporation as currently	iled with th	e Florida Dept. of S	tate)	The A	
F7002	ケ		200	2 1/4	
(Document Number o		n (if known)	'F	(C) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Pursuant to the provisions of section 607,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Profit</i>	t Corporation adopt	ts the gollowing	
A. If amending name, enter the new name of the c	orporation:			900	0
name must be distinguishable and contain the wabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	nation "Cor	p," "Inc," or "Co".	" or "incorporated A professional co		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be) D. If amending the registered agent and/or registered	red office a		nter the name of the	<u>e</u>	
new registered agent and/or the new registered	ornice addr	ess:			
Name of New Registered Agent:					
New Registered Office Address:	(Florida	a street address)			
·	(City)		, Florida Lip Code)		
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. Signature	gistered Age I am familia	ent:	e obligations of the p	oosition.	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	ARTHUR SPENCER	2 CORAL DR Key WEST, FL 33040	☐ Add ☐ Remove
			_ □ Add _ □ Remove
			Add Remove
	nendment provides for an exchange, recla		
	ons for implementing the amendment if no ot applicable, indicate N/A)	ot contained in the amendment i	itseit:

The date of each amendment(s) adoption: (date of adoption is required) Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 7/27/09
Signature Lictoria R. Impallomena. (By a director, president of other officer – it directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Title of person signing) President