L84113

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SECRETARY OF SIATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MIDDLETON'S FI	SH CAMP, INC.	
DOCUMENT NUM	BER:		
	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Mireille M. Makhoul		
	Murphy Reid, LLP	Name of Contact Person	
		Firm/ Company	
	11300 U.S. Highway One, Sto	: 401	
		Address	
	Palm Beach Gardens, FL 334	08	
		City/ State and Zip Code	
	mmakhoul@murphyreid.com		
		ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:at (355-8800
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:			
☐ \$35 Filing Fee	S43.75 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)
An Di P.C	nailing Address mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIDDLETON'S FISH CAMP, IN	MIDDI	ETON'S	FISH CAMP.	INC
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L84113		
		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this A	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
name must be distinguishable and contain "Inc" or Co.," or the designation "Co" "chartered," "professional association."	orp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:		4500 Joe Overstreet Rd.
Principal office address MUST BE A ST		Kenansville, FL 34739
C. Enter new mailing address, if applic (Mailing address MAY BE A POST C	OFFICE BOX) d/or registered office addr	
	Nate Reed	
Name of New Registered Agent	4500 Joe Overstreet Rd.	
	(Florida stro	eet address)
New Registered Office Address:	KENANSVILLE	. Florida ³⁴⁷³⁹
		(City) (Zip Code)
, , , ., ., <u>-</u>		with and accept the obligations of the position.
		egistered 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)

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 Doc	
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	PD	Robert J. Murchie	4500 Joe Overstreet Rd.
Add			Kenansville, FL 34739
X Remove			
2) Change	STD	Deborah K. Murchie	4500 Joe Overstreet Rd.
Add			Kenansville, FL 34739
X Remove			4500 Joe Overstreet Rd.
3) Change	PTSD	Nate Reed	Kenansville, FL 34739
X Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	,		
Remove			
6) Change			
-	•		
Add			
Remove			

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	uly 31, 2022	
Directive date in applicable.	(no more than 90 days after amendment file dat	re)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirement. Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	cholder action and shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the a sufficient for approval.	mendment(s)
• ,	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendm	· · · · · · · · · · · · · · · · · · ·
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	**	
	(voting group)	
July 29. Dated Signature	2022	
(By	a director, president or other officer – if directors or officers have cled, by an incorporator – if in the hands of a receiver, trustee, of onted fiduciary by that fiduciary)	
	Robert J. Murchie	
	(Typed or printed name of person signing)	
	PD	
	(Title of person signing)	