## L96630

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700440799147

2024 DEC 19 PH 3: 18

SECRETARY OF STATE TALLAHASSEE, FL



December 26, 2024

CSC

SUBJECT: KEY CARGO MARINE, INC.

Ref. Number: L96680

RESUBMIT
Please give original
submission date as file date.

We have received your document for KEY CARGO MARINE, INC. and your check(s) totaling S. However, the enclosed document has not been filed and is being returned for the following correction(s):

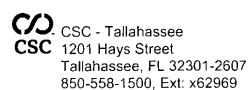
Please date the last page.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 624A00027690



To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 12/19/24 Order #: 1729974-6

Re: Key Cargo Marine, Inc. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Key Cargo Marine	, Inc.				
DOCUMENT NUM		· · · · · · · · · · · · · · · · · · ·	···-			
	s of Amendment and fee are so	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	David J. Ritter, Esq.					
	<del>- 14 1 </del>	Name of Contact Person	n	<del>-</del>		
	Brach Eighler L.L.C.					
	<del></del>	Firm/ Company		_		
	101 Eisenhower Parkway					
		Address		_		
	Roseland, New Jersey 07068					
		City/ State and Zip Cod	e	<del>-</del>		
	dritter@bracheichler.com					
	_	sed for future annual report	notification)			
	D-man address, no be as	ied for fatare annual report	Homeanony	$\overline{\infty}$	20	
For further informati	on concerning this matter, pleas	se call:		ECRETARY OF STATE TALLAH/ISSEE, FL	2024 DEC 19	
David J. Ritter, Esq.		973 at (	228-5700	AHS TAK	19	
Name	of Contact Person	Area Co	) de & Daytime Telephone Numbe	SS 0	- P	
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:	EL E	ન ડઃ 1 હ	
□ \$35 Filing Fee	☐\$43.75 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)	L TE	αı	
An Di	ailing Address nendment Section vision of Corporations D. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee			

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Key Cargo Marine, Inc.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
L96680	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Old KCM, Inc.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
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: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	SF 2
	TALLA  Treet address)
(Florida si	treet address)
New Registered Office Address:	Florida Zip Code; O P
	F STA
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
	The state of the process of the state of the
Signature of New	Registered 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)

Remove

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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			S 2
Remove Change			ECRE TALL
Add			AHAS
Remove			C 19 PM 3: TARY OF STAHINSSEE,
4) Change			77.
Add			7. A.L.A.
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

The date of each amendment(s):	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action a	and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
12/18/20 Dated	24	
	bert J. Browne, Chairman	2024 D SECR
(By a) select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	ECRETARY OF STALLAHASSEE
	Robert J. Browne	SEE PH III
	(Typed or printed name of person signing)	
	Chairman	1. I.B
	(Title of person signing)	<del></del>