N25000007852

# Florida Department of State

Division of Corporations

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN
## SOUTHERN SHRIMP ALLIANCE, INC.

| | |
|---|---|
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10-8-25

**Articles of Amendment**
**to**
**Articles of Incorporation**
**of**

SOUTHERN SHRIMP ALLIANCE, INC.

**(Name of Corporation as currently filed with the Florida Dept. of State)**

N02000007852

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this ***Florida Not For Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. **If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." **"Company" or "Co." may not be used in the name.***

B. **Enter new principal office address, if applicable:**
***(Principal office address MUST BE A STREET ADDRESS)***

9400 River Crossing Blvd., Suite 104
New Port Richey, Florida 34655

C. **Enter new mailing address, if applicable:**
***(Mailing address MAY BE A POST OFFICE BOX)***

9400 River Crossing Blvd., Suite 104
New Port Richey, Florida 34655

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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:* Gary W. Lyons, Esquire

1659 Achieva Way, Suite #128
*(Florida street address)*

*New Registered Office Address:*

Dunedin, Florida 34698
*(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 position.*

Gary W. Lyons
*Signature of New Registered Agent, if changing*

**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 | PT | John Doe |
| X Remove | V | Mike Jones |
| X Add | SV | Sally Smith |

| Type of Action (Check One) | Title | Name | Address |
|---|---|---|---|
| 1) ___ Change<br>___ Add | VP | CRAIG WALLIS | PO BOX 540<br>PALACIOS, TX 77465 |
| x Remove | | | |
| 2) ___ Change<br>___ Add | SD | CHRIS GALA | PO BOX 6189<br>FT. MYERS BEACH, FL 33932 |
| x Remove | | | |
| 3) ___ Change<br>x Add<br>___ Remove | VP | JEREMY ZIRLOTT | P.O. BOX 553<br>CODEN, AL 36523 |
| 4) ___ Change<br>x Add | S | CHERI BLANCHARD | 3389 CALEB DRIVE<br>HOUMA, LA 70360 |
| ___ Remove | | | |
| 5) ___ Change<br>___ Add | | | |
| ___ Remove | | | |
| 6) ___ Change<br>___ Add | | | |
| ___ Remove | | | |

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**E. If amending or adding additional Articles, enter change(s) here:**
*(attach additional sheets, if necessary). (Be specific)*

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**The date of each amendment(s) adoption:** September 16, 2025, 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s)** **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 09/23/25

Signature Steve Bosarge

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

STEVE BOSARGE

(Typed or printed name of person signing)

President

(Title of person signing)

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