

NO4000001383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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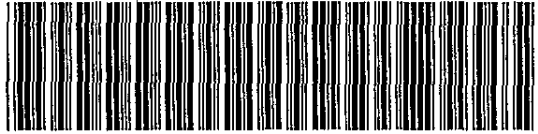
(Business Entity Name)

(Document Number)

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11/12/04--01010--003 \*\*35.00

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04 NOV 12 PM 2:00

CLERK OF STATE  
TALLAHASSEE, FLORIDA

PS 11/18/04  
Amend

McFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.

ATTORNEYS AT LAW

*Serving The Tampa Bay Area For Over 45 Years*

DONALD O. McFARLAND  
GARY W. LYONS\*  
CHUCK A. SULLIVAN\*\*†  
ELWOOD HOGAN, JR.‡  
JOSEPH T. HOBSON  
ROBERT C. THOMPSON, JR.  
LISA B. HURLEY

\*Certified Arbitrator

‡Certified Circuit Court Mediator

†Member Million Dollar Advocates Forum

MAIN OFFICE:  
311 SOUTH MISSOURI AVENUE  
CLEARWATER, FLORIDA 33756  
TELEPHONE (727) 461-1111  
FAX (727) 461-6430

EAST LAKE OFFICE:  
3490 EAST LAKE ROAD, SUITE B  
PALM HARBOR, FL 34685  
TELEPHONE (727) 771-8900

November 10, 2004

AMENDMENT SECTION  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

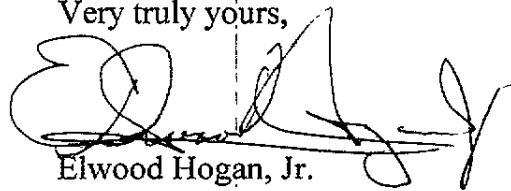
Re: Wild American Shrimp, Inc.

Gentlemen:

Enclosed is form Cover Letter, Articles of Amendment to Articles of Incorporation, and Check No. 1019 in the amount of \$35.00 for filing fee.

If you have any questions or need additional information to process this Amendment, please contact the undersigned.

Very truly yours,



Elwood Hogan, Jr.

EH/mz

Enclosures:  
as stated

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** WILD AMERICAN SHRIMP, INC.

**DOCUMENT NUMBER:** N04000001383

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Williams

(Name of Contact Person)

WILD AMERICAN SHRIMP, INC.

(Firm/ Company)

1078 Island Avenue

(Address)

Tarpon Springs, FL 34689

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

John Williams

(Name of Contact Person)

at ( 727 )

934-5362

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 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)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

**FILED**

04 NOV 12 PM 2:00

WILD AMERICAN SHRIMP, INC.

(Name of corporation as currently filed with the Florida Dept. of State)  
TALLAHASSEE, FLORIDA

NO4-000001383

(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:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE 1: Address to be changed to 1078 Island Avenue, Tarpon Springs, FL 34689

ARTICLE VI: Address to be changed to 1078 Island Avenue, Tarpon Springs, FL 34689

ARTICLE 9: Address to be changed to 1078 Island Avenue, Tarpon Springs, FL 34689

(Attach additional pages if necessary)

(continued)

The date of adoption of the amendment(s) was: June 29, 2004

Effective date if applicable: June 29, 2004  
(no more than 90 days after amendment file date)

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

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 28 day of October, 2004

Signature

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

ELAINE KNIGHT  
(Typed or printed name of person signing)

President WTS Inc.  
(Title of person signing)

**FILING FEE: \$35**