NO7000003847

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TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	ptiva, Inc.		
N07000003847 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submi	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
Margaret Feiner			
()	Name of Contact Pe	erson)	
FISH of Sanibel-Captiva			
	(Firm/ Company	·)	
2430-B Periwinkle Way			
	(Address)		-
Sanibel, FL 33957			
(1)	City/ State and Zip (Code)	
maggi@fishofsancap.org			
E-mail address: (to be used l	for future annual rep	ort notification	1)
For further information concerning this matter, please c	all:		
Margaret Feiner	at	239	472-4775
(Name of Contact Person)	·	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida l	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sect vision of Corpo te Centre of T	orations

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

Articles of Amendment to Articles of Incorporation of

F.I.S.H. OF SANIBEL-CAPTIVA, INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)	
N07000003847		
(Document Num	iber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the follow	ving
A. If amending name, enter the new name of the corpora	ation:	
	The r	
name must be distinguishable and contain the word "corpor" (Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp," or "Inc	2. ''
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	S)	วกวถ
	a C	<u>-</u>
		, I J
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	/ I
(inding dament in the control of the		E
		ο Ο
		<u>ــ</u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		
Name of New Registered Agent:		
Name by New Registered Agent.		
	(Florida street address)	_
New Registered Office Address:		
	City: Code)	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	ed Agent:	
т петеоу ассерь ine арронитет ах гедіметей адет. — i am j	риниси жин ина ассерсте общиновь од на рознит.	
	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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>PCEO</u>	Margaret Feiner	Sanibel, FL 33957
Remove			
2) <u>* Change</u> Add	<u>D</u>	William Alexander	17106 Wrigley Circle Fort Myers, FL 33908
Remove 3) Change × Add Remove	<u>T</u>	James Metzler	644 Sea Oats Drive Sanibel, FL 33957
4) * Change Add	<u>S</u>	Willy Ocasio	708 SW 13th Street Cape Coral, FL 33991
Remove 5) Change Add			
6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
-			

		. _
		
<u>. </u>		
		
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) I.	

adopted by the b	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.
Signatu	(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)
	Willy Ocasio
	(Typed or printed name of person signing)
	Secretary (Title of a second circle)
	(Title of person signing)