## N0800005458

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(City/State/Zip/Phone #)	_
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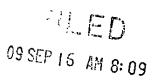
Amend Mc News 9-17-09

## **COVER LETTER**

**TO:** Amendment Section \*Division of Corporations

NAME OF CORPORATION: Make Mine Blue	egreen Inc
DOCUMENT NUMBER: <u>N08000005458</u>	
The enclosed Articles of Amendment and fee are submit	itted for filing.
Please return all correspondence concerning this matter	to the following:
	s s Obriot
(Name of Co	ontact Person)
Make Min	e Bluegreen
(Firm/ C	Company)
3008 E	Bluff blvd
(Ad	dress)
Holiday, Fl	lorida 34691
(City/ State :	and Zip Code)
pso777@e	earthlink.net
	or future annual report notification)
For further information concerning this matter, please c	all:
Princess S. Obriot	_at (727)_967-4754
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed)  ☐ \$52.50 Filing Fee 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Make Mine Blue	Green, Inc.	MATTAHASSEE FLORIDA
(Name of Corporation as currently filed	d with the Florida Dept. of Stat	te)
N08000005	5458	
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 617.1006, Florida S the following amendment(s) to its Articles of Incorporati		ofit Corporation adopts
A. If amending name, enter the new name of the corp	ooration:	
Make Mine Blue	egreen, Inc.	
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." n		rporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:		er the name of the
New Registered Office Address:	(Florida street address)	-
		, Florida
	(City)	(Zip Code)
position.	I am familiar with and accept	
Signature	of New Registered Agent, if char	nging

removed and	he Officers and/or Directors, ent title, name, and address of each onal sheets, if necessary)		
<u> Title</u>	Name	Address	Type of Action
			Remove
			☐ Add
(attach addi Article 3: Co litter, and pr environmen coastal region	eg or adding additional Articles, itional sheets, if necessary). (Be ombines education and hand comote community beautificatal restoration and protection ons and it's communities. Obdined with scientific organizations	specific) s-on stewardship to reduction efforts for the betterm of marine wildlife around servation through our efforts	the Gulf of Mexico's
	d how it effects ecosystems		<u> </u>
	we can place emphasis on po		
<del>"</del>	ssolution Agreement - Upon	······································	<del></del>
remaining a	fter payment, of all debts and	liabilities of this corporat	ion, shall be distributed for
one or more	excempt purposes within th	e meaning of Section 501	(c)(3) of the Internal
Revenue Co	ode to the following recipient	s: International Coastal Cl	ean up fund, coordinated l
The Ocean	Conservancy and to Nationa	l Marine Sanctuaries of th	e National Oceanic and
Atmospheric	c Administrations (NOAA). S	uch distributions shall be r	made in accordance with a
applicable p	provisions of the laws of this s	state.	

The date of each amendment	t(s) adoption: September 12, 2009	
Effective date <u>if applicable</u> :	(date of adoption is required) September 12, 2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Signature (By have	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)	
Princess S. Obriot		
	(Typed or printed name of person signing)	
	President President	
	(Title of person signing)	

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