N17000008377

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	ATION: Underwater Odysso	ey Rescue, Inc.	
DOCUMENT NUME	N17000008377		<u> </u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Sanjay Prasad		
		Name of Contact Persor	1
	Underwater Odyssey Rescue	Inc. d.b.a. 1 Odysea	
		Firm/ Company	
	114 E Tarpon Ave PMB 13		
		Address	
	Tarpon Springs, FL 34689		
		City/ State and Zip Code	<u> </u>
		,	
spra	nsad@uorescue.org		
	E-mail address: (to be used for future annua	report notification)
For further informatio	n concerning this matter, plea	se call:	
Sanjay Prasad		at () 387-4402 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	artment of State:
□ \$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 Add Amendment Division of C P.O. Box 63: Tallahassee,	Section Corporations 27	Division The Co	Edment Section On of Corporations Entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303



2020 MON - L RM 3: RO

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2020

SANJAY PRASAD 114 E. TARPON AVE PMB 13 TARPON SPRINGS, FL 34689

SUBJECT: UNDERWATER ODYSSEY RESCUE, INC.

Ref. Number: N17000008377

We have received your document for UNDERWATER ODYSSEY RESCUE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

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

Irene Albritton Regulatory Specialist II

Letter Number: 620A00019922

Articles of Amendment to Articles of Incorporation of

Name of Corporation as currently filed with the	SCV2 NC Florida Dept. of State)	
N17000008377		
(Docume	nt Number of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006, Flori- amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name	"corporation" or "incorporated	" or the abbreviation "Corp" or "Inc."
B. Enter new principal office address, if applicab	le:	
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)	
		<u> </u>
		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>)	<i>0X</i>)	
	<u></u>	
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, o Loffice address:	enter the name of the
Name of New Registered Agent:		
	(Fla	vida street address)
-	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Re- hereby accept the appointment as registered agent.	gistered Agent:	,
		and town Walanaian

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:

 $P = President; V = Vice President; T = Treasurer; S \neq Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	V Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>T</u>	Barbara Oshnock	53425 North Are Maycond, MI 48042
Remove 2) Change Add	TO	Sanjay Prusad	114 E Tarpon Ave. PMB 13
Remove 3) X Change Add Remove	PC	Sundra Lynn Gurulé	Tarpon Spi, 955, FL 34689 326 SE 20 ST W:11:5+00, FL 32626
4) Change Add	_ <u>D</u>	Samuel George	326 SE 2 nd St Williston, FL 32626
Remove 5) Change Add			
Remove 6) Change Add Remove			
		Articles, enter change(s) here: v). (Be specific)	
			

The date of each amendment(s) adoption: 19 Avg 2020 if other tha	n the
date this document was signed.	
The date of each amendment(s) adoption: 19 Avg 2020 if other that date this document was signed. Effective date if applicable: 19 Avg 2020 (no more than 90 days after amendment file date)	
<u>Note:</u> 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.	Ľ
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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 a	re no members or members entitled to vote on the amendment(s). The amendment(s) was/were d by the board of directors.
	Dated 27 Oct 2020
	Signature Son Pan
	(By the hairman 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)
	SANJAY PRASAD (Typed or printed name of person signing)
	Treasurer / Director (Title of person signing)