N19000009955

(Re	equestor's Name)	,
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	ne #)
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COVER LETTER

TO: Amendment Section

Division of Corporations 3	* * , ,
NAME OF CORPORATION:	ation, Inc.
N19000009955	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	omitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Mike Kent	
	(Name of Contact Person)
Progressive Management of America, Inc.	
	(Firm/ Company)
970 Gulf Shore Drive	
	(Address)
Destin, FL 32541	
	(City/ State and Zip Code)
mkent@pmainfo.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	e call:
Meredith Arth	8506646000
(Name of Contact Perso	n) at(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable 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) (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Docun	ient Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute.	s, this <i>Florida Not For Profi</i>	t Corporation adopts the	e followin
A. If amending name, enter the new name of the	e corporati	on:		
Dolphin Reef Association, Inc.				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" or th	e abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		c/o Progressive Management of America, Inc.		
		970 Gulf Shore Drive	₩	2920
		Destin, FL 32541		130
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			ン カ 担保	30
				. .
	•			_ ~.
		~ .		
D. If amending the registered agent and/or regis			the name of the	
new registered agent and/or the new register				
Name of New Registered Agent:	Mike Ken	·		
	970 Gulf S	Shore Drive		
New Registered Office Address:		(Florida str	eet address)	
New Registered Conce Matthess,	Destin		32541	
	———	(City)	Florida (Zip Code)	
		(Cili)	(Egy Coucy	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			igations of the position.	

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 I. V Mike J SV Sally S	lones	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		ticles, enter change(s) here: (Be specific)	
		· - ··	
-			·

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	 			<u> </u>
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	<u>.</u>			
				
The date of each amendment(s) adoption date this document was signed.	on:			, if other than the
Effective date if applicable:				
 -	(no more than 90 days a)	fter amendment file dat	e)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable ent of State's records.	e statutory filing require	ements, this date will r	not be listed as the

(CHECK ONE)

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of 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
(1) 76,7070
Dated CO CO
Signature
(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)
Michael Catem
/(Typed or printed name of person signing)
$M_{\rm cons}$
(Title of person signing)
(Title of person signing)