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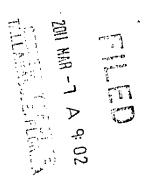
(Re	questor's Name)	
(Address)		
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PICK-UP	☐ WAIT	MAIL
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Amend NC Thereis 3-10-11

COVER LETTER

TO: Amendment Section Division of Corporations				
	WKEYE-FLETCHER MARINE INC			
DOCUMENT NUMBER: Po	0000114599			
The enclosed Articles of Amendment an	d fee are submitted for filing.			
Please return all correspondence concern	ning this matter to the following:			
MARK	Name of Contact Person			
HawkeyE	- FLETCHEIL MARINE INC			
	Firm/ Company			
8290 BA	Address			
	Address			
St Peter	SBURG, FL, 33709			
	City/ State and Zip Code			
mhanki	nsahmarine com			
E-mail address: (to be used for future annual report notification)				
For further information concerning this r	natter, please call:			
Mark Howkins	at (727) 320 0052			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following am	ount made payable to the Florida Department of State:			
□ \$35 Filing Fee □ \$43.75 Filing Fee a Certificate of State				
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of	· · · · ·
HAWKEYE - FLET		Inc. 2011 MAR.
(Name of Corporation as cur	rently filed with the Florida	a Dept. of State)
<u> </u>	599	The state of the s
	umber of Corporation (if know	wn)
Pursuant to the provisions of section 607.10 mendment(s) to its Articles of Incorporation		Porida Profit Corporation adopts the follow
. If amending name, enter the new name	of the corporation:	
H Marin	e Inc.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "p.	he designation "Ĉorp," "Inc,	," or "Co". A professional corporation
3. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>		Petersburg
	FL	33709
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	le: FICE BOX) Po	Above.
D. If amending the registered agent and/or new registered agent and/or the new reg		n Florida, enter the name of the
	As before	
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	(Florida street a	ddress)
	(Florida street a	ddress) Florida (Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>V.P.</u>	Christopher Harvey	5309 Bali Way NATA St Rete Boxed FL 33706	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter c tional sheets, if necessary) — (Be specific		
provisions	ndment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

The date of each amendment	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated No.	MA AL
(By	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Mark Haukins
	(Typed or printed name of person signing)
	CED
	(Title of person signing)