

PO1000063559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

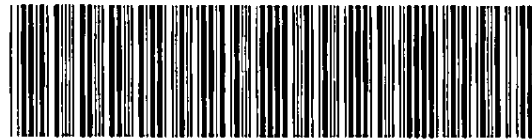
(Business Entity Name)

(Document Number)

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2023 NOV 17 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2023 NOV 17 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. BUTLER

NOV 20 2023

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-624

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$35.00

AUTHORIZATION SIGNATURE: _____

Miami River Marine Village Inc.

P01000063559

BUSINESS (Name)

Document #

___ Walk in

___ Pick up time ___

___ Mail out

___ Will wait

___ Photocopy

___ Certified Copy

___ Certificate of Status

NEW FILINGS

___ Profit

___ Not for Profit

___ Limited Liability

___ Domestication

___ Other

___ **CORP**

AMMENDMENTS

X Amendment

___ Resignation

___ Change of Registered Agent

___ Dissolution/Withdrawal

___ Merger

___ Conversion

OTHER FILINGS

___ Annual Report

___ Fictitious Name

REGISTRATION/QUALIFICATIONS

___ Foreign filing

___ Limited Partnership

___ Reinstatement

___ APOSTIL () _____
Country

___ Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MIAMI River MARine VILLAGE-INC

DOCUMENT NUMBER: PO100000163559

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Pollard
Name of Contact Person

MIAMI River MARine VILLAGE INC
Firm/ Company

31 GARDEN COVE DRIVE
Address

Key Largo FL 33037
City/ State and Zip Code

Mike Pollard 3030@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Pollard at (904) 3769763
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 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

MIAMI RIVER MARINE Village Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

PO 1000063559

(Document Number of Corporation (if known))

FILED

SECRET

STATE

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

300 Alton Rd Miami
Beach FL 33139

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

4830 Arid Ave #2065
Las Vegas NV 89115

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Michael Pollard

3501 W Beaver Street

(Florida Street address)

New Registered Office Address:

Jacksonville

(City)

Florida

32209

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

MR

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

(Attach additional sheets, if necessary)

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.

Example:

X Remove	V	Mike Jones
----------	---	------------

X Add	SV	Sally Smith
-------	----	-------------

Title

Name _____

Address

1) ~~X~~ Change

mgm

Chenoweth Michael E

31 ga Den Cove Drive
Key Largo FL 33037

Add

Remove

2) ~~X~~ Change

5

PIERCE PAMELA B

31 garden cove Drive
Key Largo FL 33037

Add

Remove

3) Change

Pd+

Michael Pollard

4830 Arid Ave
2065 Las Vegas NV
89115

X Add

Remove

4) Change

9.

Michael Pollard

390 Alton Rd #2
Miami Beach, FL
33139

 Add

Remove

5) Change

Michael Pollard

1450 Brickell Ave
Suite 2780 Miami FL
33131

Y Add

Remove

6) _____ Change

D:

Michael Pollard

9400 S Santa Monica Blvd
Beverly Hills, CA
90210

X Add

Remove

T

Michael Pollard

Stewart House, 15
Regent Street London
United Kingdom SW1Y 4LH
SW1Y 4LH

7 ADD
X

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Up DAtens trust

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: OCT 23-23, if other than the date this document was signed.

Effective date if applicable: OCT 22-23
(no more than 90 days after amendment file date)

Note: 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.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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)

Dated OCT 22-23

Signature RW Beneficiary of Estate
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

RW Beneficiary of Estate
(Typed or printed name of person signing)

RW Beneficiary of Estate
(Title of person signing)