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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: WATURS IDE PUB & PATIO, INC.

P-0200067896 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAMES R. LAWSON
Name of Contact Person WAACOS WATERSTOF PUSE PATIO ENF REDINGTON SHORES, FL 33708

Cityl State and Zip Code niahoos reduston @ small, com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (727) 793 - 8741

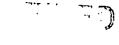
Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation



	of			2015 000 18	Aid Over
MAHOOS WATERS, DE	PVB &	PATIO	< 40	2017 277 10	HI 3- 55
(Name of Corporation as cu	rrently filed	with the Flor	ida Dept. of Sta	te)	
12-0200006	7896				
(Document Num	nber of Corp	oration (if kno	wn)		
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florid</i>	la Profit Corpo	oration adopts the	e following amend	ment(s) to
A. If amending name, enter the new name of the corporation	on:				
				The n	
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	o". A prof				
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)					
	-				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_				-
D. If amending the registered agent and/or registered offic		Flo <u>rida, ente</u>	r the name of th	<u>e</u>	_
new registered agent and/or the new registered office ac	<u>idress:</u>				
Name of New Registered Agent			- -		
(Flor	rida street ada	lress)			
New Registered Office Address:	//**· 1		, Florid	a(Zip Code)	-
	(City)			(Zīp Code)	
New Registered Agent's Signature, if changing Registered A	Agent:				
I hereby accept the appointment as registered agent. I am fam		id accept the o	bligations of the	position.	
Signature of i	Vew Register	ed Agent, if ch	anging		

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:

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

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.

Mike Jones, V as Remov Example:	re, and Sa.	lly Smith, SV as an Add.		
X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	JAAN W. LAWSON	2634 CEARE VIEW COURT	
Add			CLETAR WATER FL	
Remove		_	33761	
2) Change	P	JAMES R. LAWSON	15405 GULF BLUD #3	
Add			MADEIRA BEACH, FL	
Remove 3) Change			33708	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or add	ling addit	ional Articles, enter change(s) here:	÷	

		<u>. </u>
<u> </u>		
		
provisions for implementing the amend	ge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:	
If an amendment provides for an exchan provisions for implementing the amend (if not applicable, indicate N/A)	ge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:	1
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provisions for implementing the amend (if not applicable, indicate N/A)	Page 3 of 4	
provisions for implementing the amend (if not applicable, indicate N/A) he date of each amendment(s) adoption:	ment if not contained in the amendment itself:	
provisions for implementing the amend (if not applicable, indicate N/A) ne date of each amendment(s) adoption:	Page 3 of 4	
provisions for implementing the amend (if not applicable, indicate N/A) he date of each amendment(s) adoption:	Page 3 of 4	

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 adop by the shareholders was/were suff	ted by the shareholders.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders uch voting group entitled	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes east fo	r the amendment(s) was	were sufficient for approval
by		,,"
-, <u></u>	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of direct	ors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators	without shareholder action and shareholder
Dated	12-11-19	
	12-11-19 Dures P.L.	
selected,		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ary)
	JAME	S R. LAWSON
_	(Typed or print	ed name of person signing)
	PRES	CIDENT
(*)	itle of person signing)	