P02420

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special last visiting to Eiling Officer			
Special Instructions to Filing Officer:			

Office Use Only



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FILED
2021 JUN 18 AM 8: 01
SECRETARY OF STATE

a a Hor



E.N. Bisso Canaveral, Inc. formerly Petchem, Inc.

HARBOR TUGS

A Division of E.N. Bisso & Son, Inc.

Corporate Office: 1 Walnut Street, New Orleans, LA 70118

Phone: (504) 828-3296

Operations Office: 747 Snapper Road, Port Canaveral, FL 32920

Phone: (321) 783-7147

June 3, 2021

Florida Department of State Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Re: Name Change of Petchem, Inc. to E.N. Bisso Canaveral, Inc.

Document Number: P02420

Dear Sir:

The enclosed Amendment and filing fees with a check in the amount of \$52.50 are submitted for your review and filing. Please return all correspondence, and in particular a certified copy of the Certificate of Status, to the undersigned at:

Michael F. Vitt E.N. Bisso Canaveral, Inc. 1 Walnut Street New Orleans, LA 70118

My email address is mvitt@enbisso.com or you can contact me by telephone at (504) 828-3296.

Sincerely yours,

Michael F. Vitt Vice President

w/enc.

cc: file

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORID

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

2021 JUN 18 AM 8: 01

SECRETARY OF STATE TALLAHASSEE, FL P02420 (Document number of corporation (if known) Petchem, Inc. (Name of corporation as it appears on the records of the Department of State) Conneticut (Incorporated under laws of) (Date authorized to do business in Florida) SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? December 20, 2019 E.N. Bisso Canaveral, Inc. (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 6. If the amendment changes the period of duration, indicate new period of duration, (New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction, (New jurisdiction) 8. 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 (Florida street address) New Registered Office Address: . Florida 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

Signature of New Registered Agent, if changing

Fitle/ Capacity	<u>Name</u>	Address	Type of Action
			Remove
			Add
			CRemove
			Q _{Add}
		_	
		<u></u>	
<u>. </u>			□Add
			_ Remove
Attached is a certifica of the application to the under the laws of whi	ate or document of similar import, each Department of State, by the Secretch it is incorporated.	evidencing the amendment, authentica tary of State or other official having cus	ted not more than 90 days prior to deliv stody of corporate records in the jurisdict
_	(Signature of a direct	tor. president or other officer - if in th	e hands of
Michael F		court appointed fiduciary, by that fiduc	iary) lent & Director

FILING FEE \$35.00



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IARTFORD, CT 08115-0470 ET, HARTFORD, DT 06106

PHONE: 860-509-6003

WEBSITE: WWW.concord-sols.ct.gov

CERTIFICATE OF AMENDMENT

STOCK CORPORATION

USE INK. COMPLETE ALL SECTIONS, PRINT OR TYPE, ATTACH 81/2 X 11 SHEETS IF NECESSARY.

FILING PART	Y (CONFIRMATION WILL B	E SENT TO THIS ADDRESS):	FILING FEE: \$100		
		·	1 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3		
NAME:	Michael J. Palmieri, Esquire		MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"		
ADDRESS:	Updike, Kelly & Spella	icy, P.C.			
	100 Pearl Street		Í		
CITY:	Hartford				
STATE:	Connecticut	ZIP: 06103			
1. NAME OF C	ORPORATION:				
PETCHE	M INC.				
		RATION IS (CHECK A, B OR C):			
A. AMEND	ED				
∏ B. RESTA	red				
C. AMEND	ED AND RESTATED				
THE RESTATED	DERTIFICATE CONSOLIDA	TES ALL AMENDMENTS INTO A SINGLE	E DOCUMENT.		
3. CHECK 3A	OR 3B OR BOTH, AS	APPROPRIATE.			
XI JA. TEXT	OF EACH AMENDME	ENT / RESTATEMENT:			
The name of	the Corporation shall b	e changed to E. N. Bisso Canave	eral, Inc.		
-					
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FILING #0006699196 PG 02 OF 02 VOL B-02629 FILED 12/20/2019 09:00 AM PAGE 02141 SECRETARY OF THE STATE CONNECTICUT SECRETARY OF THE STATE

* 3B. ELECTION OF BENEFIT CORPORATION STATUS, (MUST check box 3B if electing Benefit Corporation Status	ne 1
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The corporation elects to be a Benefit Corporation. In addition to the stated purposes for which the corporation is formed, the corporation shall also have the purpose to create a general public benefit as defined in the Connecticut Benefit Corporation Act. [NOTE: If the Benefit Corporation adopts one or more specific public benefits in addition to the required general public benefit, then the corporation must set forth the specific public benefit(s) in Box 3A, "TEXT OF EACH AMENDMENT/RESTATEMENT", above, If so, then BOTH Box 3A AND Box 3B should be checked on the form.]

4. VOTE INFORMATION (SELECT A	A, B, C OR D):				
A. THE AMENDMENT WAS APPROVED BY SHAREHOLDERS IN THE MANNER REQUIRED BY SECTIONS 33-600 TO 33-998 OF THE CONNECTICUT GENERAL STATUTES, AND BY THE CERTIFICATE OF INCORPORATION.					
B. THE AMENDMENT WAS APPROVED BY THE INCORPORATORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.					
C. THE AMENDMENT WAS APPROVED BY THE BOARD OF DIRECTORS. NO SHAREHOLDER APPROVAL WAS REQUIRED.					
D. THE AMENDMENT WAS APPROVED BY A MINIMUM STATUS VOTE, AS REQUIRED BY THE CONNECTICUT BENEFIT CORPORATION ACT. SELECT D IF A MINIMUM STATUS VOTE RESULTED IN THE ELECTION OF BENEFIT CORPORATION STATUS.					
5. EXECUTION:					
DATED THIS 19th	DAY OF December	, 20 19			
NAME OF SIGNATORY (print or type)	CAPACITY/TITLE OF SIGNATORY	SIGNATURE			
MATTHEM S. HOLZHALB	PRÉS IDENT	ngagl			
	<u> </u>	<u> </u>			

DEFICE OF THE SECRETARY OF THE STATE

it is may ready that this is a true copy of record in this Office.

In Trackmony whereof. I have hereunto set my hand.

and of Seal of said State, at Hartford, day of Man A.E.

SECRETARY OF THE STATE