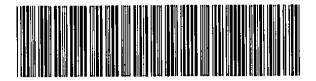
P030000 56567

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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Dribn Towing, Salvages Harine Services, 1
DOCUMENT NUMBER: 103 0000 56567
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Hannah Bold Name of Contact Person Business Control Service Inc
Name of Contact Person
Business Control Service Inc
3925 S. NOVA Rd
Address
Port Orange, FL 32127 City/ State and Zip Code
City/ State and Zip Code
Shonda@ towboatus daytonabeach. (OM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hannah Boyd at (386) 760-5454 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:
S35 Filing Fee US43.75 Filing Fee & US43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certified Copy (Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Orion Towing, Salv	age 3	Marine	Serne	es, Inc
(Name of Corporation	on as currently fi	led with the Florida	Dept. of State)	
P030000565	567			
(Docum	nent Number of Co	orporation (if known)		<u>-</u>
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	ı Statutes, this <i>Flo</i>	rida Profit Corporati	on adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the co	orporation:			
				The _new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the designation of the designatio	," "Inc," or "Co abbreviation "P.A	". A professional co	corporated" or the rporation name mu	abbreviation ist contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD)	-	<u> </u>		
	-			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>\X</u>)			2019
				· ·
	_			P]
D. If amending the registered agent and/or register new registered agent and/or the new registered of		in Florida, enter the	name of the	P1 12: 3º
Name of New Registered Agent				_
	(Florida street e	iddress)		
New Registered Office Address:		,	, Florida	
	(Cit). (1)		lip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.		and accept the obliga	itions of the positio	n
as regiment us regimered agent. I	i wa jamatan waa	and accept the maige	arons of the postuo	14.
Signa	ature of New Regi:	stered Agent, if chang	ing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 officeld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
i) Change	I Rhonda Le	hnen 10245 Ridgewood
Add		
Remove		Daytona Beach, FL
2) Change	T Tracy Pas	ternak 10245 Ridgaroud Stet
Remove 3) Change Add	s Diana M	Daytona Beach, 7
Remove		Daytona Beach,
4) Change		
Add		
5) Change		
Add		
Remove		<u></u>
6) Change		
Add		
Remove		

Attach additional	dding additional Ar sheets, if necessary).	(Be specific)				
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an amendment provisions for in	provides for an exc plementing the am	<u>hange, reclassific:</u> endment if not cor	ition, or cancella stained in the ar	ation of issued sh nendment itself:	ares,	
(if not applice	able, indicate N/A)		<u>.</u>			
<u> </u>			18		···	
.						
	··					

The date of each amendment(s) adoption: 08/24/19 , if other than to date this document was signed.
Effective date if applicable: (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 a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
Phe 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)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (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)
Shonda Kenned / (Typed or printed name of person signing)
(Title of person signing)