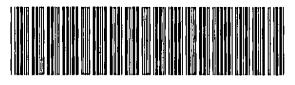
## P03000080517

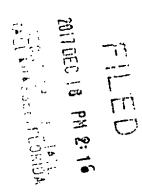
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Certified Copies	Certificates	of Status
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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPO		OAT RENTALS, INC.	
DOCUMENT NUM	P03000080517 BER:		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ROBERT MCKAY		
	SWEETWATER BOAT REN	Name of Contact Person FTALS, INC.	
	15700 QUAIL TRAIL	Firm/ Company	
	FORT MYERS, FL 33912	Address	
		City/ State and Zip Code	· ·
capti	vawatersports@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ROBERT MCKAY		239 at (	472-6336
Name	of Contact Person	Area Coc	de & Daytime Telephone Number
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address endment Section ision of Corporations ). Box 6327 lahassee, FL 32314	Amend Division Clifton	Address ment Section n of Corporations Building Kecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

	of Amendment to of Incorporation of rently filed with the Florida Dept. of State)
Articles of	of Incorporation
SWEET WATER BOAT RENTALS, INC.	
(Name of Corporation as curr	rently filed with the Florida Dept. of State)
103000080517	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
CAPTIVA WATERSPORTS , エ へ C .	The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	
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)	P.O. BOX 178
(Pruning nations)	CAPTIVA, FL 33924
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office add	dress:
Name of New Registered Agent	
(Floria	da street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	gent:  iliar with and accept the obligations of the position.
, , ,, .,	,
0: 411	low Registered Agent if changing
Signature of N	Jan Ranittarad Anaut It 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)

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 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.

Example: $\underline{X}$ Change	<u>PT</u>	<u>John De</u>	<u>oc</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	V Sally Smith			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change		_			
Add				<del> </del>	
Remove					
2) Change					
Add		_			
Remove					
3 ) Change					
Add		_			
Remove					
Kemove					
4) Change		<del>_</del>			
Add					
Remove					
5) Change		_			
Add				· · · · · · · · · · · · · · · · · · ·	
Remove					
6) Change					
6) Change		_			
Add					
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
cif not applicable, indicate N/A)	endment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
<del></del>	·

The date of each amendment(s) adoption:	, it other than th
Effective date <u>if applicable</u> :	
(no more than 90 days after amend	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	g requirements, this date will not be listed as th
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes caby the shareholders was/were sufficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups, must be separately provided for each voting group entitled to vote separately on a	
"The number of votes east for the amendment(s) was/were sufficient for app	roval
by(voting group)	·"
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholde action was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.</li> </ul>	
Signature  (By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)  ROBERT MCKAY  (Typed or printed name of person signature)	er, trustee, or other court
(Title of person signing)	<del></del>