P0400030470

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



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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: QQQQ | marine li | le, Inc. | |
|---|--|---|--|
| DOCUMENT NUMBER: <u>P0400030470</u> | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| Jacqueline (Name of C | Signeria Contact Person) | | |
| Aqua Ma (Firm/ | VIN LLQ Company) | Jen. | |
| 6171 SW | 1dress) | | |
| MIAMI = 33173 (City/ State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| Jacqueline Sichen (Name of Contact Person) | at (<u>305)</u> <u>308 5</u> (Area Code & Daytime Te | 5915 elephone Number) | |
| Enclosed is a check for the following amount: | | | |
| \$35 Filing Fee \$\sum \text{Status}\$ \$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 | Street Address Amendment Section Division of Corporations Clifton Building | | |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| (Name of corporation as currently filed with the Florida Dept. of State) |
|--|
| (Name of corporation as currently find with the Folda Sept. of Salar) (Document number of corporation (if known) |
| (Document number of corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| NEW CORPORATE NAME (if changing): |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| officers of company are being |
| amended as follows: |
| New President: Patricia Delaado |
| Jacqueline P. Sicher 15 no |
| longer President. |
| New Secretary: Jacqueline P. Sichen |
| (Attach additional pages if necessary) |
| If an amendment provides for 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) |
| |
| (continued) |

| The date of each amendment(s) adoption: 10/10/05 |
|--|
| Effective date if applicable: 10/10/05 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were approved 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 Adduller Pacher (Byla 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) JORGUELING P. SICKEL |
| (Typed or printed name of person signing) |
| 2 SCCI I S HOIVE |
| (Title of person signing) |

FILING FEE: \$35