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(Address)	-
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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF COR	PORATION:	OGGEECHEE RIVE	R, INC
DOCUMENT NUMBER:		PO4OO0132	2504
The enclosed Artic	cles of Amendment and fee	e are submitted for filing.	
Please return all co	orrespondence concerning	this matter to the following:	
		AUDERE INMAN	
•		Name of Contact Person	
	OG	GEECHEE RIVER,INC	
		Firm/ Company	
•		P.O. BOX 39	
		Address	
	CRY	STAL RIVER FL 34423	, <u>.</u>
		City/ State and Zip Code	
******	aude E-mail address: (to be u	re@vmdirect.com sed for future annual report notificat	ion)
For further inform	ation concerning this matte	er, please call:	
	UDERE INMAN		586 0329
Name	e of Contact Person	Area Code & Daytin	ne Telephone Number
Enclosed is a chec	k for the following amount	made payable to the Florida D	Department of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclo	S52.50 Filing Fee Certificate of Status Seed) Certified Copy (Additional Copy is enclosed)
Mailing A Amendment Division of P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporation Clifton Building	ns

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to **Articles of Incorporation** of

OGGEECHEE RIVER, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P04000132504

(Document Number of Corporation (if known)

TASECULATION SON

ne must be distinguishable and contain	the word "communities"	The ne
reviation "Corp.," "Inc.," or Co.," or the new must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional corporation
Enter new principal office address, if app incipal office address <u>MUST BE A STREE</u>		
Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u>)	. =
		40.
If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	(Florida street ac	ddress)
	(Florida street ac	ddress), Florida (Zip Code)

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)

<u>Title</u>	Name	Address	Type of Action
<u> </u>	MOXLEY BENJAMIN L	1107 SE 4TH AVENUE CRYSTAL RIVER. FL. 34429 US	☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
provisions (if not a	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	t contained in the amendment i	tself:
Mr. Benjamir	L Moxley President sold 50% sha	ares to VP Audere Inman ac	cording to
to Section 5	of the Buy/Sell Agreement dated 6	th day of May 2009. The ar	nendment
to the Corpor	ation is share allocation of 100%	to officer A. Inman (VP) cha	nge status
to P.			

The date of each amendment	(s) adoption: July 16th 2010
Effective date if applicable:	July 16th 2010 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_July	16th 2010
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
app	• • • • • • • • • • • • • • • • • • • •
	AUDERE INMAN (Typed or printed name of person signing)
	VP
	(Title of person signing)