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SECRETARY OF STATES
ALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NADINE & GLE	N ORIGINAL LOBSTER TRAP ART, INC
DOCUMENT NUMBER: P04000136711	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
MICHELLE MONDAY	
LOBSTER TRAP ART	Name of Contact Person
82200 OVERSEAS HWY	Firm/ Company
ISLAMORADA, FL 3303	Address
	City/ State and Zip Code
  ACCOUNTING@LOBSTERTR	APART.COM
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ase call:
MICHELLE MONDAY	at ( ) 664-0001
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

NADINE & GLEN ORIGINAL LOBSTER TRA	AP ART, INC	
(Name of Corp	oration as currently filed with the Florida Dept. of State)	
P04000136711		
(C	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Fits Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendment(s	s) to
A. If amending name, enter the new name of	he corporation:	
NADINE & GLENN ORIGINAL LOBSTER T	RAP ART, INC The new	
	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the	
B. Enter new principal office address, if appli		
(Principal office address <u>MUST BE A STREET</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFIC</u> )	AND SER -5 PA LOND PLOS IN Florida, enter the name of the	n z n ⊃
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent:  ent. I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	

Executive Officer: CFO held, President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	= Chief t r, Directe I in the fo aves the c	Financial Offi or would be P llowing mann orporation, Se	cer. If an officer/director holds moder. TD. er. Currently John Doe is listed as to ally Smith is named the V and S. The	Trustee; C = Chairman or Clerk; CEO = Chief re than one title, list the first letter of each office he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	John Doe	1	
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	me 	<u>Addres</u> s
1) Change				
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Remove				
2) Change				
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6) Change				
Add			l	
Remove			1	

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:

Please note the officer/director title by the first latter of the office title:

(Attach additional sheets, if necessary)

C. If amonding on adding additional factors	and an abanda (a) bara:
E. If amending or adding additional Articles (Attach additional sheets, if necessary). (B	enter change(s) nere.
(Miacu daditonal sneets, if necessary). The	e specific)
- <del> </del>	
	<u>:</u> 
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F. If an amendment provides for an exchange	e, reclassification, or cancellation of issued shares, ent if not contained in the amendment itself:
(if not applicable, indicate N/A)	ent i not contained in the amendment usen:
(9	
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The date of each amendment(s) adoption:date this document was signed.	if other than the
Effective date if applicable: 08/31/17	(no more than 90 days after amendment file date)
	(no more man 30 days after amenament the date)
Note: If the date inserted in this block does not document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for a	hareholders. The number of votes east for the amendment(s)  pproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	 dment(s) was/were sufficient for approval
by	
(vot)	ing group)
☐ The amendment(s) was/were adopted by the laction was not required.	
The amendment(s) was/were adopted by the i action was not required.	
08/31/17 Dated	
Signature	
(By director, presi	dent or other officer - if directors or officers have not been
selected, by an inco appointed fiduciary	rporator – if in the hands of a receiver, trustee, or other court
GLENN LA	
	Typed or printed name of person signing)
PRESIDEN	T (
<del></del>	(Title of person signing)
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