## P0500018057

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SEUFIANISSEE, FLORID
TALLAHASSEE, FLORID

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## COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: DOCUMENT NUMBER: P 050000 18057
DOCUMENT NUMBER: P 050000 18057
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Name of Contact Person
ELMO of DESMN, INC.
F:10
PO, Box 5583
Address
DESTIN, FL 32540  City/State and Zip Code
City/ State and Zip Code
TOWDOUTAESTIN @ Yahoo, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code & Daytime Telephone Number
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:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section
Amendment Section Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment

to

Articles of Incorporation

FILED

_	of
ELMO of DESTIN,	/nc. 2013 APR 17 AM 8: 06
(Name of Corporation as currently filed with t	the Florida Dept. of State) SEUT. MARIE OF STATE
P 050000 18057	TALLAHASSEE, FLORIDA
(Document Number of Corporati	
,	\ \ \ \ \ \ \ \ \ \
	this Florida Profit Corporation adopts the following amendment(s)
s Articles of Incorporation:	
. If amending name, enter the new name of the corporation	<u>a:</u>
SHIPWATCH MARIN	1= /N/C
ame must be distinguishable and contain the word "cornor	ration," "company," or "incorporated" or the abbreviation
Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.,"	or "Co". A professional corporation name must contain the
ord "chartered," "professional association," or the abbreviati	ion "P.A."
Enter new principal office address, if applicable:	NA
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	$\Lambda_1 / \Lambda_2$
(Mailing address MAY BE A POST OFFICE BOX)	/ <i>\(\frac{\partial}{A}\)</i>
. 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 V/A	
(Fl)	da street address)
(Florid	sa street adaress)
New Registered Office Address: /V//7	, Florida
,	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agene hereby accept the appointment as registered agent. I am family	gent:
nereo; accept the appointment as registered agent. I am jamit A 1 / A	uar wan and accept the ootigations of the position.
10/17	
Signature of New Register	red Agent, if 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.

X Change	<u>PT</u>	John Do	<u>oe</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones		
X Add	<u>sv</u>	Sally Sr	nith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1)Change	<u>vP</u>	) <del></del>	VICTOR	C.ADAMS	411 WINDJAMMER CT.
Add					DESTIN, FL 32541
Remove					
2) Change					
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change	*****	_			
Add					<del></del>
Remove					
5) Change		<del>_</del>			
Add					
Remove					
6) Change					
Add					
Remove					

	iding or adding add additional sheets, if i	necessary). (i	Be specific)			
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	mendment provides	for an exchang	ze, reclassifica	ation, or cancel	lation of issued s	ares,
fan ar		<u>ng we amenor</u>	aent II not coi	ntained in the a	<u>menament itself:</u>	
provis	i <mark>ons for implementi</mark> Inot applicable, indic	cate N/A)				
provis	fnot applicable, indic	1				
provis	not applicable, indic	1				
provis	fnot applicable, indic	1		······································		
provis	fnot applicable, indic	1	-			
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				
provis	fnot applicable, indic	1				

The date of each amendment(s) adoption: 4-15-13
Effective date if applicable:  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The 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.
Dated 4-15-2013  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)
ANDREW K. ADAMS (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)