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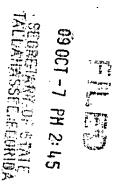
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(Requestor's Name)	
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PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	<u> </u>
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N.C. C.COULLIETTE

OCT 08 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Swing Time Bat Clut INC. Name of Corporation DOCUMENT NUMBER: POGODO149164				
DOCUMENT NUMBER: POGODO197167				
The enclosed Articles of Correction and fed	e are submitted for filing.			
Please return all correspondence concerning	g this matter to the following:			
A. RANDOUPH MCN2-1 Name of Contact Person	<u> </u>			
Ewing Time Boat Club	· · · · · · · · · · · · · · · · · · ·			
1500 Beville Ad 540 69	6-162			
DAYTONA BEACH FL J Eity/State and Zip Code	2-114			
WTWCHARTERS & Yahoo. C E-mail address: (to be used for future annual re-	ort notification)			
For further information concerning this ma				
A. MANDOLAH MCNer (Name of Contact Person	•			
Enclosed is a check for the following amou	nt:			
\$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status			
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy			
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			
The state of the s	Tallahassee, FL 32301			

Articles of Amendment

to

Articles of Incorporation

of

Swing Time Bost	Clab INC		
(Name of Corporation as curren	otly filed with the Florida l	Dept. of State)	
Fo 6000149164			
	ber of Corporation (if known	1)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of		ida Profit Corporation a	dopts the following
Yacht Enotica INC			
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "professioname must contain the word "chartered," "professioname"	ne word "corporation," "c designation "Corp," "Inc,"	or "Co". A professiona	The new ated" or the l corporation
B. Enter new principal office address, if appli	icable:	<u> </u>	- _
(Principal office address <u>MUST BE A STREET</u>	<u>"ADDRESS"</u>)	- =	3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)	HASSEE, FLORIGA	10T-7 PH 2: 45
D. If amending the registered agent and/or renew registered agent and/or the new regist		Florida, enter the name o	f the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street add	ress)	
<u>-</u>		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		accept the obligations of	the position.
Sig	gnature of New Registered A	gent, if changing	

The date of each amendment	t(s) adoption: 9-28-09
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere 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	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	0/0/11
Signature 🔟	
	a director, president or other officer – if directors or officers have not been
	octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	A. Rawrough Men') (Typed or printed name of person signing)
	Transident
	(Title of person signing)