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SECRETARY OF STATE
AND AHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Ultimate Offi	shore, Inc.	
DOCUMENT NUMBER: <u>P07000081672</u>		
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Jason D. Roberts		
(Name	of Contact Person)	
Ultimate Offshore, Inc.		
(Fi	rm/ Company)	
320 Hatteras Ave.	(Address)	
Clermont, FL 34711 (City/S	State and Zip Code)	···
For further information concerning this matter,	please call:	
Lisa Roberts (Name of Contact Person)	at (<u>352</u>) <u>394</u> (Area Code & Daytime	7 – 8219 Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Florida Dep	artment of State:
\$35 Filing Fee \$43.75 Filing Fee & 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 Tallahassae, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building	rola

Tallahassee, FL 32301

Articles of Amendment to

	FILED
2009	MAR 22
TALLAI	TARY OF STATE
te)	FLORIDA

Articles of Incorporation		SECRETARY AH 8:		
of		SECRETARY OF STATE ALLAHASSEE FLORID		
Ultimate Offshore, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)				
P07000081				
(Document Number of Corpora				
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Pro</i>	ofit Corporation adopts		
A. If amending name, enter the new name of the corporation	on:			
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may no		rporated" or the		
B. Enter new principal office address, if applicable:	320 Hatteras Ave.			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Clermont, FL 34711			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	320 Hatteras Ave.			
	Clermont, FL 34711			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
Name of New Registered Agent:		-		
New Registered Office Address: (Flor	rida street address)	_		
	(City)	, Florida (Zip Code)		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position.		t the obligations of the		

Signature of New Registered 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) <u>Address</u> **Title** Name. Type of Action Jason D Roberts 320 Hatteras Ave. ■ ☑ Add Clermont, FL 34711 ■ Remove VP Jason D Roberts 11401 Via De Renee PL . Add Clermont FL 34711 Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) PLEASE CHANGE JASON D ROBERTS ABOVE FROM VP TO P AND AS THE ONLY OFFICER ON THE CORPORATION. NOTE: WE ALSO NEED TO BE KNOWN AS AN S-CORP. I AM FILING FORM 2553 WITH MY 1120-S RETURN TO NOTIFY THE IRS.

The date of each amendment(s) adoption: 03/20/2009			
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we was/were sufficient for app	are adopted by the members and the number of votes cast for the amendment(s) roval.		
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.		
Dated_03/2	20/2009		
Signature	haven hobots		
(By	The chairman or vice chairman of the board, president or other officer-if directors in not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)		
	Jason D Roberts		
	(Typed or printed name of person signing)		
	Owner- President/Officer		
	(Title of person signing)		