## P08000069859

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OHCINDUSTRI	ES, INC.			
DOCUMENT NUME					
	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	TED W, MASSING				
	Name of Contact Person				
	O H C INDUSTRIES. INC,				
,		Firm/ Company			
	11011 SW 11 CT.				
Address					
	PEMBROKE PINES, FL3302	25			
		City/ State and Zip Code	e		
emass	ing@omcast.net				
E-mail address: (to be used for future annual report notification)					
For further information	n concerning this matter, pleas		<b>9</b> 26 5472		
	A.G	at (	) 620-3472		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	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)		
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Inhassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

FILED

	OHC INDUST	RIES, INC,	,	ليانياسه	
(Name of Co	orporation as currently f	iled with the Florida Dept	of Stards HH	20 PA	ــــــــــــــــــــــــــــــــــــ
	P08000069		TOE (	ZU F1	3 .49 1 U
	(Document Number of C	orporation (if known)	JALLANA:	SEE. I	STATE LURIDA
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this <i>Flo</i>	orida Profit Corporation ac	lopis in illowing	amendn	nent(s) to
A. If amending name, enter the new name	of the corporation:				
Saltwater Fishing Group, Inc.				The ne	พ
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co	". A professional corpora	rated" or the ab	breviatio	n
B. Enter new principal office address, if an (Principal office address MUST BE A STRE					
C. Enter new mailing address, if applicabl	le:				
(Mailing address <u>MAY BE A POST OFF</u>					
D. If amending the registered agent and/or new registered agent and/or the new rej	registered office addres	s in Florida, enter the nan	ne of the		
Name of New Registered Agent					
	(Florida street	address)			
New Registered Office Address:			, Florida		
	(C	(קי)	(Zip C	ode)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered		h and accept the obligation.	s of the position.		
	Signature of New Reg	istered 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)

Example:

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D/S/VP	Ted W. Massing	11011 SW 11 Court
x Add			Pembroke Pines, FL
Remove			33025
2) Change			<del></del>
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	additional Articles, enter change(s) here: s. if necessary). (Be specific)
	s, y necessia j). (De aprecijie)
<u> </u>	· · · · · · · · · · · · · · · · · · ·
***************************************	
<del></del>	
<del></del>	
f an amendment prov	ides for an exchange, reclassification, or cancellation of issued shares,
(if not applicable)	nenting the amendment if not contained in the amendment itself:
(у погаррисавіе,	maicale N/A)

he date of each amendmen ate this document was signed		, if other than th
ffective date <u>if applicable</u> :	July 20, 2015	
iteetive date <u>it appiteable</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this the Department of State's records.	date will not be listed as th
doption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendmen were sufficient for approval.	ot(s)
	ere approved by the shareholders through voting groups. The following states led for each voting group entitled to vote separately on the amendment(s):	ment
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
July Dated	15, 2015	
Signature _	Cleaner & Masing	
S	By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other compounted fiduciary by that fiduciary)	
	Eleanor K. Massing	
	(Typed or printed name of person signing)	
	President/poDirector/Treasurer	
	(Title of person signing)	