

P09000011065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

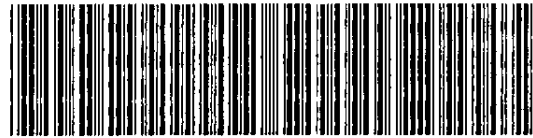
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

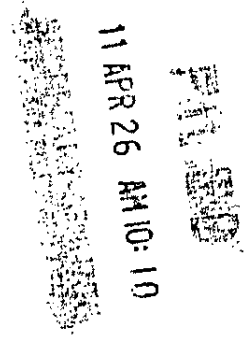
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Atrend.
DC
4/27/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Bluewater Construction Group Inc

DOCUMENT NUMBER: P09000011065

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael C Porter

Name of Contact Person

Bluewater Construction Group Inc

Firm/ Company

545 SW 18th Ave #40

Address

Fort Lauderdale, FL 33312

City/ State and Zip Code

mike@bwconstruction.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael C Porter

Name of Contact Person

at (954) 234-7599

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

11 APR 25 2009

SECRETARY OF STATE
TALLAHASSEE, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Bluewater Construction Group Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000011065

(Document Number of Corporation (if known))

11 APR 26 AM 10:10
FILED

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

545 SW 18 Ave

#40

Fort Lauderdale FL 33312

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

545 SW 18 Ave

#40

Fort Lauderdale, FL 33312

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:

Michael C Porter

New Registered Office Address:

545 SW 18 Ave #40

(Florida street address)

Fort Lauderdale

(City)

Florida 33312

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Michael C Porter

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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Lane R Birnbaum</u>	<u>2124 Manatee Drive</u> <u>Fort Lauderdale, FL</u> <u>33316</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>CEO</u>	<u>Michael C Porter</u>	<u>1743 NE 27th Drive</u> <u>Wilton Manors, FL</u> <u>33334</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>Michael C Porter</u>	<u>545 SW 18th Ave</u> <u>Fort Lauderdale, FL</u> <u>33312</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

Article II: Principle Address: 545 SW 18th Ave #40 Fort Lauderdale, FL 33312
 Mailing Address: 545 SW 18th Ave #40 Fort Lauderdale FL 33312

Article V: Name & Address: Michael C Porter 545 SW 18th Ave #40 Fort Lauderdale FL 33312
 Registered Agent: Signature: Michael C Porter

Article VI: Name and address of Incorporator: remains as stated

Article VII: Title: P Michael C Porter 545 SW 18th Ave #40 Fort Lauderdale FL 33312

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
 (if not applicable, indicate N/A)

The date of each amendment(s) adoption: 3/25/2011

Effective date if applicable: 3/25/2011
(date of adoption is required)
(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 3/25/2011

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)

Michael C Porter

(Typed or printed name of person signing)

Registered Agent

Owner

(Title of person signing)