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R. WHITE

### **COVER LETTER**

Division of Corporations						
NAME OF CORPORATION: SPEARS Boat Sales and Securce FNC.  DOCUMENT NUMBER: PO9 0000 11266						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Bobby Spears  Name of Contact Person  Spears Boat Sales and Service INC  Firm/Company  5895 S. Kanner Hwy  Address  Stuart Fl 34997  City/State and Zip Code  Bobbys 4545 a gmail. Low  E-mail address: (to be used for future angual report notification)						
For further information concerning this matter, please call:  Boolog Spears at 772, 223, 3634						
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  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)						

TO: Amendment Section

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

# Articles of Amendment to

## Articles of Incorporation

E H E D

(Document Number of Corporation (if known) 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: Florida (City) (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. 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)

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.

Example: X Change	PT John Do	<u>oe</u>			
X Remove	<u>V</u> <u>Mike Jones</u>				
X Add	SV Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>		
1) Change	Manager	Jeremy Spears	4393 Sugar Pine Dr		
X Add	•	•	Borg Ration Fl		
Kemove	·		33487		
2) Change	Manager	Jason Spears	4393 Sugar Pine DR Boca Raton Fl		
Add Remove			3348)		
3) Change			/		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	(Be specific)
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
I an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an adment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame:	nange, reclassification, or cancellation of issued shares, and and an angellation of issued shares, and an angellation of
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provisions for implementing the ame:	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	8.12-13	, if other than the
Effective date if applicable:	8-12-15	-
(r	no more than 90 days after amendment file dat	te)
Note: If the date inserted in this block does not r document's effective date on the Department of Sta		nts, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for appr		nendment(s)
The amendment(s) was/were approved by the sh must be separately provided for each voting gro		
"The number of votes cast for the amendm	nent(s) was/were sufficient for approval	
hy(voting	g group)	
The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action and shar	eholder
Dated8-12.	-15	
Signature Bobbe		·····
	nd or other officer — if directors or officers have orator — if in the hands of a receiver, trustee, or that fiduciary)	
(Ту	Bobby Spear pred or printed name of person signing)	<u></u>
	President (Title of person signing)	·