PO9000038655

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SECRETARY OF STATE
ANASSEE, FLORIDA



0/3/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Ocean Rid	er Manufacturing, Inc.			
DOCUMENT NUMBER: P0900003865	55			
The enclosed Articles of Amendment and fee are st	ubmitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Raymond L. Rob	oinson, Esq.			
	Name of Contact Person			
Robinson & Asso	ociates, PA			
\	Firm/ Company			
1501 Venera Ave	enue, Suite 300			
	Address			
Coral Gables, FL	_ 33146			
	City/ State and Zip Code			
jessica@rrobinsonla	w com			
,	ised for future annual report notification)			
E-man address. (to be to	ised for future annual report notification)			
For further information concerning this matter, plea	ase call:			
Teri Garrido	_{at (} 305) 662-7618			
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 □\$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 Street Address				
Amendment Section	Amendment Section			
Division of Corporations Division of Corporations				
P.O. Box 6327	Clifton Building			
Tallabassee FI 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

Ocean Rider Manufacturing, Inc.

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

ent(s) to

P09000038655	TALLAHASSE	
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amenda
A. If amending name, enter the new n	ame of the corporation:	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	The neparty "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>	<u>if applicable:</u> TREET ADDRESS)	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)	4600 SW 71 Avenue
		Suite 104
		Miami, FL 33166
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	Raymond L. Ro	binson, Esq.
	1501 Venera A	venue, Suite 300
	•	reet address)
New Registered Office Address:	Coral Gables,	, Florida 33146
	(Cit)) (Zip Code)
New Registered Agent's Signature, if o		
I hereby accept the appointment as regis	skred agent. I am familiar	with and accept the obligations of the position.
Si	gnature of New Registered	Agent, if changing

Page 1 of 4

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:

Ę

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 <math>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	<u>PT</u> <u>J</u>	<u>Iohn Doc</u>	
X Remove	<u>v</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>D</u>	Gardo Gomez	4600 SW 71 Avenue
Add			#104
X Remove			Miami, FL 33155
2) Change	P/D	Joel Rabin	4600 SW 71 Avenue
X Add			#104
Remove			Miami, FL 33155
3) Change	S/T	Michael Scott Quartin	4600 SW 71 Avenue
X Add		· · · · · · · · · · · · · · · · · · ·	#104
Remove			Miami, FL 33155
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 ;		
Add			
Remove			

. <u>If am</u> (Attac	ending or adding additional Articles, enter change(s) here: n additional sheets, if necessary). (Be specific)
N/A	
	
If an	amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself:
<u> </u>	if not applicable, indicate N/A)
N/A	
21/ 22	
	

The date of each amendment	(s) adoption: _	7/27/2012			
Effective date <u>if applicable</u> :	7/27/12				
		(no more than	90 days after amen	dment file date)	
Adoption of Amendment(s)	(<u>C</u>	CHECK ONE)			
The amendment(s) was/were by the shareholders was/we			ne number of votes	cast for the amendment	t(s)
☐ The amendment(s) was/wern must be separately provided					nent
"The number of votes	cast for the am	nendment(s) was/we	ere sufficient for ap	proval	
by				***	
	(v	oting group)			
☐ The amendment(s) was/wer action was not required. ☐ The amendment(s) was/wer action was not required.	. ,				der
Dated_9/2	7/12		(a)		
(B se	lected, by an in		he hands of a recei-	or officers have not been ver, trustee, or other co	
	/ .	Joel Rabin			
		(Typed or printed	d name of person si	gning)	
		Director			
		(Title of perso	on signing)		
		Director			