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(Business Entity Name)				
(Document Number)				
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Office Use Only



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Amend

JUL 13 2015

I ALBRITTON

* Please Rush * "

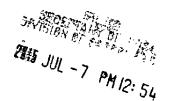
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	SEA FROM SPAC	CE, INC.			
DOCUMENT NUME			· .		
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	CHARLENE DEAL				
		Name of Contact Person	n		
	AVMAR ACCOUNTING SERVICES INC				
		Firm/ Company	- 10 00000		
	9 SW 13TH STREET				
	 	Address			
	FT LAUDERDALE, FL 333	15			
		City/ State and Zip Cod	e		
СНА	RLENE@AVMARACCOUN	TING.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
CHARLENE DEAL		at (<u>954</u>	764-0404		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee. FL 32301

Articles of Amendment to Articles of Incorporation of



SEA FROM SPACE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
risions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amorphism:	endment(s) t
me, enter the new name of the corporation:	
	new
inguishable and contain the word "corporation," "company," or "incorporated" or the abbrev r Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta "professional association," or the abbreviation "P.A."	
cipal office address, if applicable: 1137 S Southlake Drive	
dress <u>MUST BE A STREET ADDRESS</u>) Hollywood	
FL 33019	·····
ting address, if applicable: s MAY BE A POST OFFICE BOX) 1137 S Southlake Drive	and the state of t
Hollywood	
FL 33019	
registered agent and/or registered office address in Florida, enter the name of the agent and/or the new registered office address:	
rw Registered Agent	
(Florida street address)	
ered Office Address:, Florida	
(City) (Zip Code)	
ent's Signature, if changing Registered Agent: appointment as registered agent. I am familiar with and accept the obligations of the position.	
Cignature of Non- Parintened to set if shareign	
(Florida street address) ered Office Address:, Florida	

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	<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>	<u>Addres</u> s
1) Change	P		LOTTA PURKIS	1137 S Southlake Drive
Add X Remove				Hollywood, FL 33019
2) Change	P	_	CHARLOTTE PURKIS	1137 S Southlake Drive
X Add				Hollywood, FL 33019
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Ramova				

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Be specific)	
·····		
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	· · · · · · · · · · · · · · · · · · ·	
	·	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
	***************************************	- · · · · · · · · · · · · · · · · · · ·
	,	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
	0 days after amendment file date)
Note: If the date inserted in this block does not meet the appli- document's effective date on the Department of State's records.	cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the shareholders. The by the shareholders was were sufficient for approval.	e number of votes cast for the amendment(s)
☐ The amendment(s) was were approved by the shareholders thromust be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/wer	re sufficient for approval
by(voting group)	······································
 □ The amendment(s) was/were adopted by the board of directors action was not required. □ The amendment(s) was/were adopted by the incorporators with action was not required. 	
	er – if directors or officers have not been thands of a receiver, trustee, or other court
Charlotte Purkis	
(Typed or printed i	name of person signing)
President	
(Title o	of person signing)