## P10000044949

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**C.COULLIETTE** 

JAN 1 0 2012

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SEACOAS	T SHIPPING CO.	INC.
DOCUMENT NUMB	BER: <u>P1000004494</u>	9	<del></del>
The enclosed Articles	of Amendment and fee are st	abmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	·		
	J.D. MACK	Name of Contact Persor	1
	TAX-MACK USA,		
•		Firm/ Company	
	9820 NW 7th AV		
		Address	
-	MIAMI, FLORIDA	3 3 1 5 0  City/ State and Zip Code	
		City/ State and Zip Code	,
	F-mail address: (to be u	sed for future annual report	notification)
	D man address, (to be a	sed for future annual report	
For further information	concerning this matter, pleas	se call:	·
		305	602 5102
J. D. MACK	f Contact Person	at (at 5	693-5193 de & Daytime Telephone Number
			•
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fec	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Co	□\$52.50 Filing Fee Certificate of Status Certified Copy opy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Division Clifton 2661 Ex	Address nent Section n of Corporations Building secutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

of	of actor		
SEACOAST SHIPPING CO., INC.			
(Name of Corporation as currently filed with the Flori	da Dept. of State)	_	
P10000044949		_ <u>.</u>	
(Document Number of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	rida Profit Corporation adopts the following	ng amendme	nt(s) to
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporation." "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A	". A professional corporation name must	abbreviation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		_	P. C.
-		- 2 JA	ISLO?
· -		_ =====================================	93.
C. Enter new mailing address, if applicable:		9	87,
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		- \$	
-		_ <b>*</b> 5	
-		_ `\ {	<b>表</b> デ
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the		ð.
Name of New Registered Agent			
(Florida street a	ddress)		
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 Agen	et if abanaina		
Signature of New Registered Agen	i, ij enanging		

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 = ChiefExecutive 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	Doc	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
_X Add	<u>SV</u> Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change  X Add Remove	<u>V / T</u>	TED CHEMALY	2974 NW North River Dr MIAMI, FLORIDA 33142
2) Change Add Remove	<del></del>		
3 ) Change Add Remove			
4) Change Add Remove		· .	
5) Change Add Remove	<del></del>	· · · · · · · · · · · · · · · · · · ·	
6) Change Add Remove		<del></del>	

If amending or adding additional Artic (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s) a	doption: JANUARY 4th 2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Signature (By a d	Ledy Chemaly irector, president or other officer – if directors or officers have not been
selecter appoint	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	GLADYS CHEMALY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)