

P10000047098

Florida Department of State  
Division of Corporations  
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Fax Number : (850) 617-6380

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COR AMND/RESTATE/CORRECT OR O/D RESIGN  
OFFSHORE ESSENTIALS INC.

Certificate of Status	0
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*Amend*  
*DC*

JUL 13 2012

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: OFFSHORE ESSENTIALS INC.

DOCUMENT NUMBER: P10000047098

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

Please return all correspondence concerning this matter to the following:

Barbara Dang  
(Name of Contact Person)

Legalzoom.com, Inc.  
(Firm/ Company)

7083 Hollywood Blvd. Ste. 180  
(Address)

Los Angeles, CA 90028  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Barbara Dang at ( 323 ) 962-8600  
(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 &  
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☒ \$43.75 Filing Fee &  
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enclosed)

☐ \$52.50 Filing Fee  
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Certified Copy  
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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

Articles of Amendment  
to  
Articles of Incorporation  
of

**OFFSHORE ESSENTIALS INC.**

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

**P10000047098**

(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**)

15400 Orange Blvd.

Loxahatchee, FL 33470

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

15400 Orange Blvd.

Loxahatchee, FL 33470

**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:

Josh Karuzas

New Registered Office Address:

14620 96th Lane North

(Florida street address)

West Palm Beach

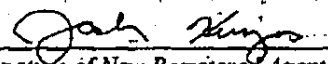
(City)

Florida 33412

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PSTD</u>	<u>CHAPPELL, JEAN C</u>	<u>1960 Beach Road</u> <u>Englewood, FL 34223</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P, D</u>	<u>Steve Dombrowski</u>	<u>15400 Orange Blvd</u> <u>Loxahatchee, FL 33470</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>S, T, D</u>	<u>Josh Karuzas</u>	<u>15400 Orange Blvd</u> <u>Loxahatchee, FL 33470</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)

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**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)

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The date of each amendment(s) adoption: 6/22/2010

Effective date if applicable:

*(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 6-24-2010

Signature

Josh Karuzas

(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)

Josh Karuzas

(Typed or printed name of person signing)

Secretary

(Title of person signing)