P100000390863

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Cannon Blue Ente	rprises, Inc.	
DOCUMENT NUMI			
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	Gregory S. Oropeza, Esq.		
		Name of Contact Person	1
	Smith Oropeza Hawks, PL		
	<u> </u>	Firm/ Company	
	138-142 Simonton Street		
		Address	
	Key West, FL 33040		
		City/ State and Zip Code	e
cody	@divebarshirtclub.com		
		sed for future annual report	notification)
	,	,	,
For further information	n concerning this matter, pleas	se call:	
Gregory S. Oropeza		305	. 296-7227
	of Contact Person	at (305) de & Daytime Telephone Number
Name	of Contact Person	Area Co	ue & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ertment 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)
Mai	ling Address	Street	Address
Ame	ndment Section		ment Section
	sion of Corporations		n of Corporations
	Box 6327 ahassee El 32314		Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as cu	
	urrently filed with the Florida Dept, of State)
P10000090863	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporati	ion:
	poration," "company," or "incorporated" or the appreviation " or "Co". A professional corporation name must contain the ation "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 new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flor	rida street address)
(Flow New Registered 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) X Change	PST	Cody Shoemake	1515 Johnson Street
Add			Key West, FL 33040
Remove			
2) Change		Michael Edwards	825 Eaton Street, Apt D
Add			Key West, FL 33040
X Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	onal sheets, if n	iecessary).	(Be specific)	inge(s) here:				
	<u>-</u> .			<u></u>				
			-					
<u>. </u>								

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an amendm provisions fo	nent provides f or implementin	<u>lor an excha</u> ag the amen	inge, reclassif dment if not	<u>ication, or c</u> contained in	ancellation of the amendo	<u>of issued sha</u> ient itself:	ires,	
(if not ap	oplicable, indic	ate N/A)						
								
		<u> </u>						

The date of each amendment(s) ac date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(sficient for approval.	÷)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
11/03/2010 Dated	ely Thren	
(By a di selected	president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	t
	CodyShoemake	
•	(Typed or printed name of person signing)	-
	President	
•	(Title of person signing)	