## PUXX 102667

(Re	questor's Name)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION:	WEEDOO GREENBOAT, INC.			
DOCUMENT NU	MBER:	ER:P10000102667			
The enclosed Artic	les of Amendment and fee a	re submitted for filing.			
Please return all co	rrespondence concerning th	is matter to the following:			
_		JOHN GRIMES			
	_	lame of Contact Person			
_	WEED	OO GREENBOAT, INC.			
		Firm/ Company			
_	13501 SOUTH SHORE BLVD, STE 102				
		Address			
<del>.</del>	WELLINGTON, FL 33414				
	C	ity/ State and Zip Code			
	E-mail address: (to be use	d for future annual report notification)	<del></del>		
For further informa	tion concerning this matter,	please call:			
J(	OHN GRIMES		2-7039		
Name of Contact Person		Area Code & Daytime Tele	phone Number		
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment of State:		
	\$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 P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation**

## TATELARIAN 26 PAIR: 30 of WEEDOO GREENBOAT, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

P10	000102667	
(Document Num	ber of Corporation (if kno	wn)
ursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corporation adopts the fo
If amending name, enter the new name of	the corporation:	
WEEDOO	GREENBOAT INC	The ne
ame must be distinguishable and contain to bbreviation "Corp.," "Inc.," or Co.," or the came must contain the word "chartered," "proj	designation "Corp," "Inc	c," or "Co". A professional corporatio
Enter new principal office address, if app		
Principal office address <u>MUST BE A STREE</u>	T ADDRESS )	
	<del></del>	
	<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
(Maning united MAT DE A POST OFFIC	CE BOX)	
. If amending the registered agent and/or r	ogistared office address i	n Florida, enter the name of the
new registered agent and/or the new regis		ii Piorida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
		, Florida
•	(City)	(Zip Code)
ew Registered Agent's Signature, if changin	g Registered Agent:	
hereby accept the appointment as registered a		and accept the obligations of the position.
<u> </u>	ignature of New Registere	d Agent if changing

The date of each amendment(s) a	doption: /- 2/-//
•	(date of adoption is required)
Effective date if applicable: (no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(vol	ing group)
action was not required.  The amendment(s) was/were ad action was not required.  Dated 1/21/20  Signature X  (By a diselected	lopted by the incorporators without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	JOHN GRIMES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)