

P11 000000 9468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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10/23/24--01014--003 **43.75

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2024

ROBERT G ZINNN
813 SE 2ND COURT INC
FORT LAUDERDALE, FL 33301

SUBJECT: ZINN CAPITAL, INC
Ref. Number: P11000009468

We have received your document for ZINN CAPITAL, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

select a type of action for ROBERT G ZINN

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 224A00024658

Rec 11-18-24

Articles of Amendment
to
Articles of Incorporation
of

ZINN CAPITAL, INC

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

ZINN CAPITAL, INC

(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:

WORKBOAT CAPITAL, INC

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)

813 SE 2ND COURT

FRONT

FORT LAUDERDALE, FL 33301

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

813 SE 2ND COURT

FRONT

FORT LAUDERDALE, FL 33301

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 SAME

SAME

(Florida street address)

New Registered Office Address: SAME, 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 Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, : 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 = C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office in 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. Then 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 Chair Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

No change
Approved Robert Z

Type of Action
(Check One)

Title Name

Address

1) <input type="checkbox"/> Change	PTSD	ROBERT ZINN	313 SE 2ND COURT
<input type="checkbox"/> Add			FRONT
<input type="checkbox"/> Remove			FORT LAUDERDALE, FL 33301
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
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4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
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5) <input type="checkbox"/> Change			
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6) <input type="checkbox"/> Change			
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<input type="checkbox"/> Remove			

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CLERK OF COURT
CLERK OF COURT

(Attach additional sheets, if necessary). (Be specific)

[illegible]

(if not applicable, indicate N/A)

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CHEN, J. J.
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The date of each amendment(s) adoption: 10/14/2024, if other than the date this document was signed.

Effective date if applicable: 10/14/2024
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

Dated 10/15/24

Signature

Robert G Zinn
(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)

ROBERT G ZINN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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TALL