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Division of Corporations

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Account Name : ALRON ENTERPRISES, INC.
Account Number : 120000000113
Phone : (321)951-7626
Fax Number : (321)723-8218 Fax Number

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN INDIAN RIVER SEAFOOD INC

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ALRON ENTERPRISES INC

8/30/2011

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August \30.

FLORIDA DEPARTMENT OF STATE Division of Corporations

INDIAN RIVER SEAFOOD INC. 1540 INDIAN RIVER DR SEBASTIAN, FL 32958

SUBJECT: INDIAN RIVER SEAFOOD INC

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Annette Rammey . Regulatory Specialist II FAX Aud: #: H11000214928 Latter Number: 711A00020271

P.O BOX 6327 - Tallahassee, Florida 32314 08/30/2011 15:38 FAX 3217238218

## ALRON ENTERPRISES INC

## Articles of Amendment

to

Ø 003

, n	rticles of Incorpora	ation S
<u> </u>	of	2011 AUG 30 AM 10: 10
, Indian Rive	er Seafood Inc	SECRETARY OF STATE
(Name of Corporation as curren	tly filed with the Flo	rida Dept. of State) AHASSEE, FLORIDA
P110	00052034	
(Document Numb	er of Corporation (if l	known)
rsuant to the provisions of section 607.1006, nendment(s) to its Articles of Incorporation:	Florida Statutes, this	s Florida Profit Corporation adopts the follow
If amending name, enter the new name of t	he corporation:	
me must be distinguishable and contain the		The new
bbreviation "Corp.," "Inc.," or Co.," or the dame must contain the word "chartered," "profess. Enter new principal office address, if applications and applications of the contains of the con	ssional association,"	
	_	
	<u> </u>	
Total new marking address if applicables		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )	
If amending the registered agent and/or reg new registered agent and/or the new register		ss in Florida, enter the name of the
Name of New Registered Agent:		
	/h! ! 1	
New Registered Office Address:	(Florida stre	et adaress)
		Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing sereby accept the appointment as registered age		

Signature of New Registered Agent, if changing

08/30/2011 15:38 FAX 3217238218

ALRON ENTERPRISES INC

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>	4.6	Name	Address	Type of Action
<u>DVP</u>		William Tiedge	1540 Indian River Drive Sebastian, Fl 32958	□ Add ☑ Remove
		,		
	•			
prov	isions	dment provides for an exchange, re for implementing the amendment in applicable, indicate N/A)	classification, or cancellation of f not contained in the amendme	issued shares, nt itself:
	y not a	ppiicable, maicale IVA)		

8/30/2011 15:38 FAX 3	3217238218 ALRON ENTERPRISES INC ment(s) adoption: August 1, 2011	<b>2</b> 000
	(date of adoption is required)	
Effective date if applical	(no more than 90 days after amendment file date)	
S.	(no more man so mays after amenament site date)	
Adoption of Amendmen	t(s) (CHECK ONE)	
	s/were adopted by the shareholders. The number of votes cast for the amendment(sas/were sufficient for approval.	s)
	s/were approved by the shareholders through voting groups. The following statement ovided for each voting group entitled to vote separately on the amendment(s):	int
"The number of v	otes cast for the amendment(s) was/were sufficient for approval	
by	77	
	(voting group)	
The amendment(s) was action was not require	s/were adopted by the board of directors without shareholder action and shareholded.	r
The amendment(s) was action was not require	s/were adopted by the incorporators without shareholder action and shareholder d.	
Dated_	8/1/11	
Signatu	5 Sugar andrum	
	(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)	
	Susan Andrews	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	