P11000074947

(Re	questor's Name)	
(Ad	dress)	
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	Ironlink, Inc.		
DOCUMENT NUMI	P11000074947		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Mark Lassila		
	Ironlink, Inc.	Name of Contact Person	
		Firm/ Company	
	10834 Tamis Trail		
	Lake Worth, Florida 33449	Address	
		City/ State and Zip Code	
Mark	lassila@hotmail.com	sed for future annual report i	notification)
For further information	n concerning this matter, pleas	se call:	
Mark Lassila		561 at (346-0733
Name o	of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depar	rtment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

Articles of Amendment to

Articles of Incorporation of

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15 JUN 11 PM 2:45

Ironlink, Inc.	
	n as currently filed with the Florida Dept. of State
P11000074947	Ob
(Docume)	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corr Boat Dynasty, Inc.	poration;
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
oru chartereu, projessiona association, or me ac	N/A
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDR</u>	(E22)
	Martin Company
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX))
. If amending the registered agent and/or registered	d office address in Florida, enter the name of the
new registered agent and/or the new registered of	
N/A	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Regist	
nerevy accept the appointment as registerea agent. To	am familiar with and accept the obligations of the position.
Signatu	ure 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)

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1)Change		_		
Add				*****
Remove				
2) Change				
Add		_		
Remove				
3) Change		_	·	
Add				
Remove				
4) Change		_		H
Add				
Remove				
-				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
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) N/A		

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	06/08/2015	
Effective date <u>if applicable</u> :	NI COLEGE	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ut(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	99	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	lder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
June 8,	2015	
Dated	Man dam	
Signature(Bv	a director, president or other officer – if directors or officers have not bee	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other co	
арр	ointed fiduciary by that fiduciary)	
	Mark Lassila	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	