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Amend Man. 10,12

COVER LETTER

TO: Amendment Section '

Division of Corporations		
NAME OF CORPORATION: FLOVIDA	Marine Life	è Corp.
DOCUMENT NUMBER: 012000C	2599	<u> </u>
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Ryan Buts	Name of Contact Person	
Florida Mar	ine Life Co	xP·
	Firm/ Company	
18210 Merwyn	Circle	
_	Address	
Wceki Wachee		<u> </u>
	City/ State and Zip Code	
Kvega 424 D) E-mail address: (to be use	act.com	
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, please	e call:	
Katherine Vega	at (352	585-0699 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	rtment of State:
\$35 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		Address
Amendment Section Division of Corporations		ment Section n of Corporations
P.O. Box 6327		Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

, Articles of A to	\mathcal{L}
Articles of In	corporation 12
Thereido Marios	Life Corp. Florida Dept. of State 3: 18
(Name of Corporation as currently filed with the l	Florida Dent, of State)
	0005991
(Document Number of Corporation (· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	18210 Meruyn Cercle Weeki Wachee, Fi.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18210 Merwyn Circle Weeki Wachel, II. 34614
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	s:
Name of New Registered Agent Ryan B	atson (same agent)
same 18210 N (Florida st	atson (same agent) Merwyn Circle (different address)
New Registered Office Address: Wolki (City)	Achel Florida 34-614 (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Tanjumuu	accept the congenions of the position.
Signature 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 <math>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: XChange	<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>	Name	Address
1)Change	T	Julianna Thom	as 3228 Deltona Blvd Spring Hill Fl.
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove	-		
5) Change Add Remove		-	
6) Change Add Remove			

	or adding additional A onal sheets, if necessary). (Be specific)			
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		······································	· Maria		
	nent provides for an ex	rchange reclassifica	ition, or cancellati	on of issued share	<u>s.</u>
provisions fo	or implementing the an pplicable, indicate N/A)	mendment if not con	ntained in the ame	ndment itself:	
provisions fo	or implementing the ar	mendment if not con	stained in the ame	ndment itself:	
provisions fo	or implementing the ar	mendment if not con	stained in the ame	ndment itself:	
provisions fo	or implementing the ar	mendment if not con	stained in the ame	ndment itself:	
provisions fo	or implementing the ar	mendment if not con	stained in the ame	ndment itself:	
provisions fo	or implementing the ar	mendment if not con	ntained in the ame	ndment itself:	

The date of each amendment(s) adoption	on: 07/04/2017
Effective date if applicable:	07/04/2012
Elicente date <u>il applicatio</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes east for the	e amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated <u>0) 0</u>	14/12
	r, president or other officer - if directors or officers have not been
	an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
	Ryan C. Datson (Whed or printed name of person signing)
	President
	(Title of person signing)