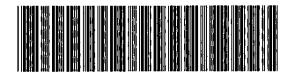
## P12000010113

| (Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name) |
|---|
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)                                |
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)                                |
| (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)   |
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| Certified Copies Certificates of Status   |
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| Special Instructions to Filing Officer:   |
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FEB 0 9 2012 T. ROBERTS

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T. ROBERTS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR          | RATION: SEA Educa                           | ation Adventures   | , Incorporated   |
|-------------------------|---|--|--|
| DOCUMENT NUMI           | P1200001                                    | 0113   |  |
|                         |   |  |  |
| The enclosed Articles   | of Amendment and fee are sub                | omitted for filing.  |  |
| Please return all corre | spondence concerning this mat               | ter to the following:  |  |
|                         | Laura J Ruettin                             | nan  |  |
|                         |   | Name of Contact Perso  |  |
|                         | SEA Education                               | <del></del>  | Incorporated   |
|                         | PO Box 1176                                 | Firm/ Company  |  |
|                         |   | Address  |  |
|                         | Crystal River, F                            |  |  |
|                         |   | City/ State and Zip Cod  | e  |
|                         | seaventuresme                               | @aol.com   |  |
|                         | E-mail address: (to be use                  | ed for future annual report  | notification)  |
| For further information | n concerning this matter, please            | e call:  |  |
| Laura Ruet              | timan                                       | at (352  | 302-1432   |
| Name o                  | of Contact Person                           |  | de & Daytime Telephone Number  |
| Enclosed is a check fo  | r the following amount made p               | ayable to the Florida Depa   | artment of State:  |
| □ \$35 Filing Fee       | ☐\$43.75 Filing Fee & Certificate of Status | ■\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|                         | ling Address                                |  | Address  |
|                         | endment Section<br>sion of Corporations     |  | ment Section<br>on of Corporations   |
| P.O.                    | Box 6327                                    | Clifton  | Building   |
| Talla                   | ahassee, FL 32314                           |  | xecutive Center Circle   |

## Articles of Amendment to Articles of Incorporation

| SEA Education | Adventures, | Incorporated |
|---------------|-------------|--------------|
|---------------|-------------|--------------|

| (Name of Corporation as currently filed with the  | Florida Dept. of State)  |  |
|---|--|--|
| P120000010113   | 12 FFP 20  |  |
| (Document Number of Corporation   | (if known)   |  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:   | (if known)  SECRETAL Following arrendment(s) to SELECTION ADDRESS Florida Profit Corporation adopts the following arrendment(s) to |  |
| A. If amending name, enter the new name of the corporation:   | ***/DA   |  |
|   | The new  |  |
| name must be distinguishable and contain the word "corporation"<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the   |  |
| B. Enter new principal office address, if applicable:   | 11690 West Clearwater Court  |  |
| (Principal office address MUST BE A STREET ADDRESS)   | Homosassa, FL 34448  |  |
|   |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | PO Box 1176  |  |
|   | Crystal River, FL 34423  |  |
|   |  |  |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres   | dress in Florida, enter the name of the  |  |
| Name of New Registered Agent  Name of New Registered Agent  Laura J Ruettima  |  |  |
| 11690 West Clea   |  |  |
|   | reet address)  |  |
| New Registered Office Address: Homosassa  | , Florida 34448  |  |
| (City,  |  |  |
|   |  |  |
| New Registered Agent's Signature, if changing Registered Agent  | t:   |  |
| hereby accept the appointment as registered agent. I am familiax  | with and accept the obligations 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 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 Doe          |   |
|-------------------------------|--------------|-------------------|---|
| X Remove                      | <u>v</u>     | Mike Jones        |   |
| X Add                         | <u>sv</u>    | Sally Smith       |   |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>       | Address   |
| 1) Change<br>X Add<br>Remove  | Р            | Laura J ruettiman | PO Box 1176<br>Crystal River, FL 34423                  |
| 2) Change<br>Add<br>Remove    | _ <u>P</u>   | Jess W. Shows     | 11119 West State Park Street<br>Crystal River, FL 34428 |
| Change Add Remove             |              |                   |   |
| 4) Change<br>Add<br>Remove    |              |                   |   |
| 5) Change Add Remove          |              |                   |   |
| 6) Change<br>Add<br>Remove    |              | -                 |   |

| N/A .  |                           |
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| If an amendment provides for an exchange, reclassification, or cancellation of issued s  provisions for implementing the amendment if not contained in the amendment itself  (if not applicable, indicate N/A) | <u>hares,</u><br><u>:</u> |
|  |                           |
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The date of each amendment(s) adoption: February 1, 2012 February 1, 2012 (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) 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 ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated February 1, 2012 director, president of other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Laura J Ruettiman Jess W. Shows (Typed or printed name of person signing) Outgoing President / Incoming President (Title of person signing)