## P12000014885

| West P                  | Anselmo Medici<br>52 Touchstone Ct.<br>alm-Beh., FL 33-418 |              |
|-------------------------|--|--------------|
|                         | dress)   |              |
| (Cit                    | y/State/Zip/Phone  | e #)         |
| PICK-UP                 | ☐ WAIT   | MAIL         |
| (Bu                     | siness Entity Nar  | ne)          |
| <b>\-</b>               | <b>,</b>   | ··- <b>,</b> |
| · /Do                   | cument Number)   |              |
| (00                     | cument Number)   |              |
| Certified Copies        | _ Certificates   | s of Status  |
| Special Instructions to | Filing Officer:  |              |
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SECRETARY OF STATE TALLAHASSEE, FLORIDA 2012 FEB 29 AM 8: 38

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## **Articles of Amendment** to **Articles of Incorporation**

## Sail The Seas Inc.

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

## P12000014885

(Document Number of Corporation (if known)

MILER AN 8:38 Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| must be distinguishable and contain the word p.," "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the ab. | "Inc," or "Co". A professiona                | "incorporated" or the ad<br>l corporation name must d |
|---|--|---|
| nter new principal office address, if applicable:<br>cipal office address <u>MUST BE A STREET ADDRI</u>   | N/A  |   |
| nter new mailing address, if applicable:<br>ailing address <u>MAY BE A POST OFFICE BOX</u> )  | N/A  |   |
|   |  |   |
|   |  |   |
|   |  | the name of the                                       |
|   |  | the name of the                                       |
| w registered agent and/or the new registered off  |  | the name of the                                       |
| w registered agent and/or the new registered off  | ice address:  (Florida street address)       | , Florida   |
| Name of New Registered Agent  | īce address:                                 |   |
| Name of New Registered Agent  N/A   | (Florida street address)  (City) ered Agent: | , Florida(Zip Code)                                   |

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:<br>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>Nam</u>  | <u>ıe</u> | <u>Addres</u> | s |
| 1) Change Add Remove          |              | <del></del> |           |               |   |
| 2) Change Add Remove          |              |             |           |               |   |
| 3 ) Change Add Remove         |              |             |           |               |   |
| 4) Change<br>Add<br>Remove    |              |             |           |               |   |
| 5) Change<br>Add<br>Remove    |              |             |           |               |   |
| 6) Change<br>Add<br>Remove    |              |             |           |               |   |

| • |   |
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| E. If amending or adding additional Artic (attach additional sheets, if necessary).  | <u>:les, enter change(s) here</u> :  (Be specific)  |
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| F. If an amendment provides for an excha provisions for implementing the amendification (if not applicable, indicate N/A)  N/A | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
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| The date of each amendment(s)                            | February 25, 2012  |
|--|--|
| Effective date <u>if applicable</u> :                    | N/A  |
| <u>ii appieasie</u> .                                    | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                 | (CHECK ONE)  |
| The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.  |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes ca                                  | ast for the amendment(s) was/were sufficient for approval  |
| by   | (voting group)   |
|  | (voting group)   |
| ☐ The amendment(s) was/were a action was not required.   | adopted by the board of directors without shareholder action and shareholder   |
| ☐ The amendment(s) was/were a action was not required.   | adopted by the incorporators without shareholder action and shareholder  |
| Dated2   | 127/12   |
| Signature  | Jula My_   |
| (By:   | a director, president or other officer - if directors or officers have not been  |
|  | eted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)                              |
| иррс   |  |
|  | AWSELMO F. MEDIC/ (Typed or printed name of person signing)  |
|  | (Typed or printed name of person signing)  |
|  | (Title of person signing)  |
|  | (Title of person signing)  |