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T. RODERES

COVER LETTER

TO: Amendment Section

. Division of Corpo	orations		
NAME OF CORPOR	RATION: Blue Ocear	Travel & Busine	ess Services, Inc.
DOCUMENT NUMÍ	BER: P1200001562	25	
	of Amendment and fee are su		
Please return all corres	spondence concerning this ma	tter to the following:	
	Sylvia Alvarez		
		Name of Contact Persor	1
	Blue Ocean Trav	el & Business Se	ervices, Inc.
		Firm/ Company	
	1305 Homestead	Rd N, Suite 102	2,
		Address	
	Lehigh Acres, FL	33936	
	, ,	City/ State and Zip Code	9
evh	viaalvarez01@ms	n.com	
	E-mail address: (to be us		notification)
	The state of the s		
For further informatio	n concerning this matter, pleas	se call:	
Sylvia Alvare	e Z	at (239	645-0375
	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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)
	iling Address		Address
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327			on of Corporations Building
Tallahassee, FL 32314			Executive Center Circle
		Tallaha	assee, FL 32301

But had got got a comment of the com

Articles of Amendment to Articles of Incorporation



Blue Ocean Travel & Business Services, Inc.

(Name of Corporation as currently filed with the Florid	

(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Blue Ocean Multi-Services, Inc.	The new
name must be distinguishable and contain the word "corporati "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:	904 Lee Blvd
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 102
	Lehigh Acres, FL 33936
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	904 Lee Blvd
	Suite 102
·	Lehigh Acres, FL 33936
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida s	treet address)
New Registered Office Address: N/A	, Florida
(Cit)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
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	PT John D	<u>Ooe</u>	
X Remove	<u>V</u> <u>Mike J</u>	lones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	N/A	N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
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	
provisions for implementing the amendment if not contained in the amendm	ient itself:
(if not applicable, indicate N/A)	
N/A	
	
- 	

1.5

The date of each amendment(s)	adoption: 10/4/2012
Effective date if applicable: 1	0/4/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated_10/4/2	2012
Signature	Suw:
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Sylvia Alvarez
	(Typed or printed name of person signing)
	President
	(Title of person signing)