## P12000039104

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SECRETARY OF STATE
ALLAHASSEF FINALE

T. LEMIEUX

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ROGLIE	it jet ski	Co.
DOCUMENT NUMBE		0039104	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Michel	Name of Contact Person	<u> </u>
<del></del>	<u></u>	Firm/ Company	<del></del>
	6406 A)U)	100 / 5	
_	V (00 10 00	Address	
	Hisleah	Address FC33	218
<del></del>		City/ State and Zip Cod	e
		,	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Michel	Rogue	at ( <del>)</del> 86	
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)
	ng Address		Address
	dment Section	Amendment Section Division of Corporations	
	on of Corporations  Box 6327		Building
	nassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Kogliet Je	t SKI, Co		
	currently filed with the Flor	rida Dept. of State)	
P 1200003			
(Document	Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation adopts the follow	wing amendment(s) to
A. If amending name, enter the new name	me of the corporation:		
Roaltet Nai	Newske. Coe	D	The new
name must be distinguishable and conte "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	ition "Corp," "Inc," or "Co	o". A professional corporation name mi	abbreviation ust contain the
B. Enter new principal office address, i	f applicable:	6406 NW 199 L	
(Principal office address <u>MUST BE A ST</u>		Hialaah FL 3301	<u> </u>
C. Established Manual Sand	bl		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		6406 NW 199 LN	
		Hislah FL 33015	
			<del></del>
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter the name of the	
Name of New Registered Agent	N/M	<u> </u>	
	6406 NW 19 (Florida street	1 address)	
New Registered Office Address:	Hisleah (City)	, Florida 3301 S (Zip Code)	<del>-</del>
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent: ered agent. I am familiar wit んん	th and accept the obligations of the positi	5 TA
Sig	mature of New Registered Ag	ent, if changing	LED 29 PM 8: 04 Any of STATE

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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>e Jones</u>	
_X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	NP_	Eniliano Herwondez	6406 NW 199 LN
_X_ Add			Halah, Fl 33015
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	). (Be specific)
<i>∾/</i> A	
	<del></del>
	<del></del>
<del> </del>	
	*
	change, reclassification, or cancellation of issued shares,
amendment provides for an exc	
isions for implementing the am	nendment if not contained in the amendment itself:
isions for implementing the am	nendment if not contained in the amendment itself:
isions for implementing the am	./.
isions for implementing the am	nendment if not contained in the amendment itself:
isions for implementing the am	./.
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isions for implementing the am	./.
isions for implementing the am	./.
isions for implementing the am	./.
isions for implementing the am	./.
amendment provides for an exc visions for implementing the am (if not applicable, indicate N/A)	./.

The date of each amendment(s) a	doption: 11 06 2012
Effective date <u>if applicable</u> :	11/06/2012
<u> </u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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	
•	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Datedl	1 06/2012
Signature	director, president or other officer – if directors or officers have not been
(By a d	lirector, president or other officer - if directors or officers have not been
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)
арроп	ned inductary by that inductary)
	Midnel Roque
	(Typed or printed name of person signing)
	President
	(Title of person signing)