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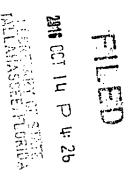
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: STONER BOX	ATWORKS, INC.		
P12000048785 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee ar	re submitted for filing.		
Please return all correspondence concerning this	matter to the following	ā:	
Nancy Stoner, Esq.			
17 	(Name of Conta-	et Person)	· · · · · · · · · · · · · · · · · · ·
Daniels, Rodriguez, Berkeley, Daniels & Cruz,	P.A.		
	(Firm/ Com	pany)	
4000 Ponce De Leon Bivd., Suite 800			
	(Addres	s)	
Coral Gubles, FL 33146			
	(City/ State and)	Zip Code)	
nstoner@drbde-law.com			
E-mail address: (to be	e used for future annua	l report notificat	on)
For further information concerning this matter, p	olease call:		
Nancy Stoner Esq.		305 at	448-7988
(Name of Contact P	erson)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ide payable to the Flori	da Department c	of State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of St	ee & \$\Bar{\text{\$\subset}\$\$\$ \$\subseteq\$\$ Certified Copy (Additional coenclosed)	Cer py is Cer (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)
Mailing Address Amendment Section		Street Address Amendment Se	

Amendment Section
Division of Corporations
P.O. Box 6327
T. Hallman 27 22211

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

STONER BOAT WORKS, INC.		
\	urrently filed with the Flor	ida Dept. of State)
P12000048785		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida 8 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	porațion:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS OF A STREET ADDRESS O	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		enter the name of the
Name of New Registered Agent:		
<u>New Registered Office Address</u> ;	(F)	orida street address)
		17 logisto
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept	the obligations of the position.
	Signature of New Regis.	tered Agent, if changing

Page 1 of 4



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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	p	Joshua Stoner	5835 COMMERCE LANE
Add			SOUTH MIAMI, FL 33143
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			**************************************
Remove			
4) Change			
Add			
Remove			A
5) Change			
Add			
Remove			
6) Change			
AdJ			
Remove			

<mark>f amending or adding additional Arti</mark> attach additional sheets, if necessary).	(Be specific)			
				
				
		 		
				
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	e date of each amendment(s) adopti	on:	if other than the
date	this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block dument's effective date on the Departr	oes not meet the applicable statutory filing requirements, this date will not nent of State's records.	ne listed as the
Ad	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were adopto was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
	have not been se	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	_
	_J @	(Typed or printed name of person signing)	
		(Title of person signing)	