## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : G & A ACCOUNTING AND TAXES SERVICES, INC.

Account Number : I20120000033

Phone : (305)801-5394

Fax Number : (786)231-5720

\*\*Enter the email address for this business entity to be used for futurê annual report mailings. Enter only one email address please.\*\*

COR AMND/RESTATE/CORRECT OR O/D RESIGN HIGH SEAS BROKERAGE GROUP, INC

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03/11/2015

06:47

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Articles of Amendment Articles of Incorporation øf

## HIGH SEAS BROKERAGE GROUP, INC

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

## P12000070240

(Document Number of Corporation (if known)

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Example:

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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.

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)  1) Change Add Remove	Title	Name MA	Address
2) Change Add	<del>,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		
Remove 3) Change Add Remove			
4) Change Add Remove	distribution of the second of	-	
5) Change Add Remove			
6) Change Add Remove		•	

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profession and the second	
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mendment provides for an exchange, rec	hassification, or cancellation of issued shares,
islons for implementing the amendment if If not applicable, indicate N/A)	I not contained in the amendment itself:
	<del></del>

03/11/2015 06:47 TO:18506176380 FROM: 7862315720 Page: 6 The date of each umendment(s) adoption: date this document was signed. Effective date if applicable: (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 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. Signature (By a director, president or other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JUDITH LUENGO

(Typed or printed name of person signing)

(Title of person signing)