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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR		OMPANIES, INC.		
DOCUMENT NUMB	P12000104608			
		hmitted for filing		
The enclosed Afficies of	of Amendment and fee are su	ommed for iming.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Lou Ann Weeks			
	BLUEWATER COMPANI	Name of Contact Persor ES, INC.	1	
	8253 BREEZE COVE LA	Firm/ Company NE		
•	ORLANDO, FL 32819	Address		
	City/ State and Zip Code			
	LWEEKS@BLUEWATE	RCOMPANIES.BIZ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Lou Ann WEEKS		321 at (	794-8157	
Name o	f Contact Person		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)	
Ane Divi: P.O.	ing Address Inducent Section Ission of Corporations Box 6327 Ihassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810	

Tallahassec, FL 32303

## Articles of Amendment to Articles of Incorporation of

BLUEWATER COMPANIES, INC.

(Name of Corporation as current P12000104608	ly filed with the Florida Dept. of Sta	<u>ite</u> )	
		<del></del>	
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts th	e following amendme	ent(s) t
A. If amending name, enter the new name of the corporation:		ery.	
name must be distinguishable and contain the word "corporation," "	company," or "incorporated" or the c	The new abbreviatión "Const"	
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co"	A professional corporation name m	ust contain the word	!
"chartered," "professional association," or the abbreviation "P.A."	8253 BREEZE COVE LANE	. AA	,
B. Enter new principal office address, if applicable:	62.0 DREEZE COVE LAND	-6_	, .
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	ORLANDO, FL 32819	P	ر راد
		6:	The .
		<u> </u>	Mark-21
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8253 BREFZE COVE LANE	··· <b>01</b>	
	ORLANDO, FL32819		
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 <u>e</u>	
(Florida st	vet address)		
New Registered Office Address:	(City) Florid	a(/.ip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		position.	
Signature of New R	egistered Agent, if changing	<del></del>	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(c), F.S.		

## 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)

Add

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	<u>PT</u>	John Doc	
·			
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	202
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	2020 HAR -
1) Change			- 6 · · · · · · · · · · · · · · · · · ·
Add			6. P
Remove			
2) Change			·
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
<i>5)</i> Change			
Add			
Remove			
6) Change			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)		
<del></del>		<del></del>	
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		23	70 h
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued share idment if not contained in the amendment itself:	es,	
(if not applicable, indicate N/A)	idiacit ii not contained in the amendment risen.		

The date of each amendment(s) ad-	ption:		, if other than the
date this document was signed. MAI	CH 1, 2020		
Effective date <u>if applicable</u> :	(no more than 90 days after	amendment file date)	<del></del>
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statuto artment of State's records.	ry filing requirements, this date w	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of dire	ectors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ed by the shareholders. The number of icient for approval.	votes cast for the amendment(s)	
must be separately provided for e	wed by the shareholders through voting ach voting group entitled to vote separate r the amendment(s) was/were sufficient	tely on the amendment(s):	2020 HAR -6
0,	(voting group)		P 11.
MARCH I	2020	. : ]	6: 35
selected.	ctor, president or other officer – if directly an incorporator – if in the hands of a		<del></del>
appointe	I fiduciary by that fiduciary) WALLACE W. WEEKS, JR.		
-	(Typed or printed name of pen PRESIDENT	son signing)	
_	(Title of person signing)		