P13000043889

(Red	questor's Name)	.
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nai	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	
	,	

Office Use Only



700289986267

09/09/16--01029--001 **70.00

THE FOR OF CORPORATIONS

16 SEP -9 AM 9: 09

SEP 15 2016 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: DCEANE DOCUMENT NUMBER: P 13000	1889
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
MARK M OCEANGRIP	AVS Name of Contact Person
OCEANGRIP	/NC
B121 Var	Firm/ Company
SARAINA	Address 34240
mark @ o	City/ State and Zip Code CLANGY P. COM sed for future annual report notification)
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, pleas	ee call:
MACL MAUS Name of Contact Person	at (944 B09 05 4B) Area de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$\square\$\$\$\$\square\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

name must be distinguishable and contain the we	und "comparation" "company"	The ne
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professio	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent	l office address:	· · ·
	l office address:	· · ·
new registered agent and/or the new registered Name of New Registered Agent	l office address: (Florida street address)	
new registered agent and/or the new registered	l office address: (Florida street address)	

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>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones _	
_X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One) 1) Change Add	Title		Name Michelle Marys	Address B121 VEITADA SARKOTA FU 3424
Remove				
4) Change Add Remove				
5) Change Add Remove		_		
6) Change Add				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional specific) (Be specific)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
<u> </u>

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date,)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followin must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share.	holder
action was not required.	
Le of 11 2011.	
Dated A A	
Signature	
(By a director, president or other officer – if directors or officers have	not been
selected, by an incorporator - if in the hands of a receiver, trustee, or o	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	