# P13000057449

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED FILED



### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corpo	orations				
	3 S MAR BER: P130000574		S INC		
DOCUMENT NUMB	ER: 1 10000001				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	ALFRE	EDO MANGA	СНІ		
		Name of Contact Person	<del></del>		
•		Firm/ Company			
	2269 S UNIVERSITY DR #316				
•		Address			
	DAVIE	, FL 33324			
		City/ State and Zip Code	e		
	MARINE	@36MAPINE	COM		
E-mail address: (to be used for future annual report notification)					
			,		
For further information concerning this matter, please call:					
ALFREDO	MANGACHI	<sub>at (</sub> 954	<sub>.)</sub> 335-7040		
Name of Contact Person Area Code & Daytime Telephone N			de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	☐S43.75 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)		
<u>M</u> ail	ling Address	Street	Address		
Amendment Section		Amendment Section			
Division of Corporations  Division of Corporations					
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## 3 S MARINE SUPPLIES, INC

(Name of Corporation as	currently filed with the Flor	rida Dept. of State)			
	P1300005744	<b>19</b>			
(Docume)	nt Number of Corporation (if k	mown)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation a	dopts the following	amendment(s) to	D
A. If amending name, enter the new na	ame of the corporation:				
				The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpore	orated" or the ab ation name must c	breviation ontain the	
B. Enter new principal office address. (Principal office address MUST BE A S					
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)					
D. If amending the registered agent an new registered agent and/or the new			ne of the		
Name of New Registered Agent			-		
New Revistered Office Address:	DAVIE  (City)		33324 (Zip Code)	SECH TALLA	"~
New Registered Agent's Signature, if c I hereby accept the appointment as regist Signature.		h.	ns of the position.	JL 17 PM 4: 0: RETARY OF STAT AHASSEE. FLORI	FILED AND FILED

## 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	<u>PT</u>	John Doe			
X Remove	<u>v</u>				
		Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Namç</u>	<u>Addres</u> s		
1) Change	D	ROALD SKOGLUND	2269 S UNIVERSITY DR		
Add			#316 DAVIE, FL 33324		
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add					
Remove					

ttach additiona	dding additional Ard sheets, if necessary).	(Be specific)			
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				•	
<del> </del>		* · · · · · · · · · · · · · · · · · · ·			
<u>í an amendmen</u>	t provides for an exc	hange, reclassifi	cation, or cance	ellation of issued s	hares,
if not appli)	mplementing the am cable, indicate N/A)	enament ii not c	ontained in the	amenument itseii	Ŀ
(i) 1101 iipp11					
<del></del>		<u> </u>			
					<u> </u>
	<u> </u>				

The date of each amendment(s) adoption:	, if other than the
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	
by"  (voting group)	
(voting group)	
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.	
Dated Joly 15-14 2014 Signature Thangach	
(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 other court appointed fiduciary by that fiduciary)	<del></del>
ALFREDO MANGACHI	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	