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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: NEROBLU YACI	T SALES, CORP	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	MARCO REIS		
		Name of Contact Person	1
	USA TAX CORP		
		Firm/ Company	
	591 E SAMPLE RD		
		Address	
	POMPANO BEACH FL 330	064	
		City/ State and Zip Cod	e
USA	FAX@USATAXFL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
MARCO REIS		954 at (788-1818
Name (of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment of State:
S35 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)
	ling Address		Address
	endment Section sion of Corporations		ment Section on of Corporations
	Box 6327		Building
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

1	N	ı	:	D	1	۲.	١	H	ŧ	ľ	ı	1	٦	,	1	ı	ſ	٠.	Ы	ľ	ı.	5	١.	٨	1	1	ς.	r	٠,	'n	T	2	D

NEROBLU YACHT SALES, CORP								
(<u>Name</u>	of Corporation as currer	tly filed with the Florida Dept. of	State)					
P13000069947								
	(Document Number	of Corporation (if known)						
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s <i>Florida Profit Corporation</i> adopt	s the following amendment(s) to					
A. If amending name, enter the new name, enter the name, enter			The new					
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	ed" or the abbreviation					
B. Enter new principal office address,	if applicable:	7575 IMPERIAL DRIVE APT	701					
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	BOCA RATON FL 33433						
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		7575 IMPERIAL DRIVE APT 701						
		BOCA RATON FL 33433						
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent			f the					
istine by their regimered rigent	7575 IMPERIAL DR AI	PT 701						
		treet address)						
New Registered Office Address:	BOCA RATON	Ul.	33433 orida					
New Registered Office Address.		(City)	(Zip Code)					
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ager tered agent. I am familia	nt: with and accept the obligations III AHA ASS						
	Signature of New	Registered Agent, if changing	2 P T					

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 Doc	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	FLAVIO V CONSTANTINO	16102 EMERALD ESTATES
Add			APT 209 WESTON FL 33331
X Remove			
2) Change	P	FLAVIO V CONSTANTINO	7575 IMPERIAL DRIVE
X Add			APT 701 BOCA RATON
Remove			FL 33433
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change ·			
Add			. <u></u>
Remove			
6) Change			
Add			
Remove			

	02/15/2017	
Thodate of each amendment(s) adolate this document was signed.	ption:	, if other than the
. 02/15/. Effective date <u>if applicable:</u>	,	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this intment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendmenter of the approval.	ent(s)
The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders through voting groups. The following statich voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east for	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adopt- action was not required.	ed by the incorporators without shareholder action and shareholder	
02/15/2017		
Dated		
Signature	(Lotte)	
(By a dire	ctor president of other officer - if directors or officers have not be	en
	by an incorporator – if in the hands of a receiver, trustee, or other c	ourt
appointed	fiduciary by that fiduciary)	
FI	AVIO V CONSTANTINO	
	(Typed or printed name of person signing)	
PJ	RESIDENT	
	(Title of person signing)	