## P13000077930

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Cedar Ke	ev Seafood Products, Inc.
NAME OF CORPORATION: OCUMENT NUMBER: P13000077	930
The enclosed Articles of Amendment and fee are s	
Please return all correspondence concerning this ma	atter to the following:
Jesse Roche	
Cedar Key Se	Name of Contact Person  afood Products, Inc.
5315 Lexingto	Firm/ Company n Dr.
Parrish, FL 34	Address 219
	City/ State and Zip Code
jesse.roche@gma E-mail address: (to be t	ail.com used for future annual report notification)
For further information concerning this matter, plea	ase call:
Jesse Roche	<sub>at (</sub> 941) 725-7033
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED

## CEDAR KEY SEAFOOD PRODUCTS, INC.

9015 MAR 26 PM 4: 3

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

(Document Number of Corporation (if known)

P13000077930

TAHASSEE. FLORIDA

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

s Articles of Incorporation: <u>If amending name, enter the new name of the corporation:</u> ATHENA LIFE MANAGEMENT, IN	· ·
anne must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or ord "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbrevion. "Co". A professional corporation name must contain
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )	NA
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
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 NA	
(Florida s	treet address)
New Registered Office Address:	, Florida
New Registered Office Address: (City	, Florida ') (Zip Code)
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	
Signature of New Registered	

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	NA .	
Add				
Remove				
2) Change				
Add	~			
Remove				
3) Change				
Add				
Remove				
4) Change				
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Remove				
5) Change				
Add		<del></del>		
Remove				
Remove				
6) Change				<del></del>
Add				<del></del>
Remove				

	icles, enter change(s) here: (Be specific)
A	
	homes replacification or concellation of ignied charge
If an amendment provides for an exclusions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s) adoption: Same as Signed differ, 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 east 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 3/23/2015
Signature (By director, president or other officer – it 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)
Jesse Roche
(Typed or printed name of person signing)
CEO
(Title of person signing)