

P13000091680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

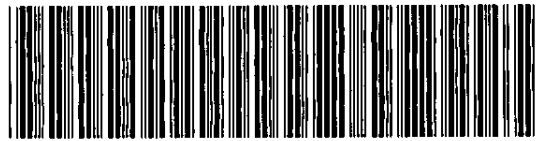
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/03/17--01011--007 **35.00

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
17 FEB -3 AM 9:48

FEB 07 2017
C McNAIR

Checklist for filing the articles of amendment

- ☒ Final page must be signed and dated by Donald Hofmann
- ☒ Check email listing on the page labeled COVER LETTER, to ensure that the one I have is correct. (I have DHOFMANN@AQUALOGIX.COM, which may not be the correct address.)
- ☒ Make check for \$35 out to "Florida Department of State"
- ☒ Mail to Division of Corporations:
 - o Check
 - o Cover letter and form (total pages: 6)

If you are sending this by FedEx/UPS, the physical mailing address is:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

If you are sending this by US Mail, the mailing address is:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 FEB -3 AM 9:46

BRIAN R. GIBBONS, P.A.
Attorney at Law

3936 S. Semoran Boulevard, Suite 330
Orlando, Florida 32822-4015
E-mail: trademarks@briangibbons.com

Telephone: (407) 384-6156
Facsimile: (407) 384-2601

BRG17-103
January 31, 2017

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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DIVISION OF CORPORATIONS
17 FEB -3 AM 9:48

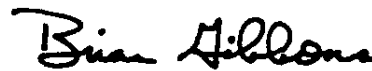
Re: Amendment of Articles of Incorporation

Dear Sir or Madam:

Enclosed please find Articles of Amendment for the Articles of Incorporation of Aqualogix, Inc. (Document P13000091680), changing its name from "Aqualogix, Inc." to "Aqualogix Inc".

Should there be any further information we need to provide or should you have any questions, please do not hesitate to contact me.

Sincerely,



Brian Gibbons, Esq.

BRG/ras
Encl

COVER LETTER

TO: Amendment Section
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 FEB -3 AM 9:40

NAME OF CORPORATION: AQUALOGIX, INC.

DOCUMENT NUMBER: P13000091680

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONALD HOFMANN

Name of Contact Person

AQUALOGIX INC

Firm/ Company

4440 PGA BOULEVARD, SUITE 600

Address

PALM BEACH, FL 33410

City/ State and Zip Code

DHOFMANN@AQUALOGIX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN R. GIBBONS, ESQ.

at (407)

384-6156

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
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 FEB -3 AM 9:40

AQUALOGIX, INC.

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

P13000091680

(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:

A. If amending name, enter the new name of the corporation:

AQUALOGIX INC

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

N/A

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent N/A

N/A

(Florida street address)

New Registered Office Address: N/A, Florida N/A
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____
2) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____
3) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____
4) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____
5) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____
6) ☐ Change	_____	N/A	_____
☐ Add	_____	_____	_____
☐ Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

January 1, 2017
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

January 1, 2017
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 requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

- ☐ 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.

2/1/17
Dated _____

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 other court appointed fiduciary by that fiduciary)

DONALD HOFMANN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)