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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hi Seas Marine	Corporation				
DOCUMENT NUMBER: P13000091964					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	atter to the following:				
Nick Mountoulias					
<del></del>	Name of Contact Person				
Hi Seas Marine Corporati	Hi Seas Marine Corporation				
	Firm/ Company				
3811 NW 1st Place					
	Address				
Deerfield Beach, FL 3344	12				
	City/ State and Zip Code				
nick@hiseasmarineac.com					
_	used for future annual report notification)				
2 11111 433,000 (10 00 1	to relate annual report notification,				
For further information concerning this matter, plea	ase call:				
Nick Mountoulias	954 621-7918				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	e payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee 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

Hi Seas Marine Corporation

2018 SEP 20 AM 8: 10

(Name of Corporation as currently filed with the Florida Dept. of State) CF STATE TALLAHASSEE, FL P13000091964 (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: 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." 3811 NW 1st Place B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Deerfield Beach, FL 33442 C. Enter new mailing address, if applicable: 3811 NW 1st Place (Mailing address MAY BE A POST OFFICE BOX) Deerfield Beach, FL 33442 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 (Florida street address) New Registered Office Address: (City) 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 <math>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>c</u>		
X Remove	<u>Y</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change					
Add					
Remove					
2) Change		_	<u></u>		
Add					
Remove				<u> </u>	
3) Change	-		<del> </del>		
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
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f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an and an an and an an and an an and an and an and an an and an

	September 17, 2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	eptember 17, 2018	
Effective date <u>if applicable</u> :	sptember 17, 2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date volument of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<del>,</del> "	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Septemi Dated	per 17, 2018	
Signature	director, president or other officer – if directors or officers have not been	
selec	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Nick Mountoulias	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	***************************************

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