P14000009142

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ALTUS SURF INC DOCUMENT NUMBER: P14000009142 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ABRAHAM I. ALLOUCHE Name of Contact Person **ALTUS SURF INC** Firm/ Company 1064 NW 3 ST Address HALLANDALE, FL 33009 City/ State and Zip Code abe@islanddaze.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ABRAHAM I. ALLOUCHE 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to **Articles of Incorporation** of

ALTUS SURF INC

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

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P14000009142

SECRETAN, OF STATE TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

ent(s) to

N1/A	ame of the corporation:		
N/A			The ne
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpor	
B. Enter new principal office address (Principal office address MUST BE A S		N/A	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
			
D. If amending the registered agent a	nd/or registered office ad	dress in Florida, enter the na	me of the
D. If amending the registered agent an new registered agent and/or the new registered agent and/or the new registered agent and agent and agent and agent agent and agent agen			me of the
	w registered office addre	SS:	me of the
new registered agent and/or the ne	w registered office addre	ss: LLOUCHE	me of the
new registered agent and/or the ne	ABRAHAM I. A 1064 NW 3 ST	ss: LLOUCHE	me of the
new registered agent and/or the ne	ABRAHAM I. A 1064 NW 3 ST (Florida S	ss: LLOUCHE street address)	- -
new registered agent and/or the ne	ABRAHAM I. A 1064 NW 3 ST (Florida S	ss: LLOUCHE street address) , Florida	33009 (Zip Code)
new registered agent and/or the ne	ABRAHAM I. A 1064 NW 3 ST (Florida s	ss: LLOUCHE street address) , Florida	- - ,33009

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>Name</u>	<u>Addres</u> s		
1) Change	PS	ABRAHAM I. ALLOUCHE	1064 NW 3 ST		
Add			HALLANDALE, FL 33009		
Remove					
2) Change	VPT	MARTIN M. POMPHREY	10175 COLLINS AVE		
Add		-	SUITE 203		
Remove			BAL HARBOUR, FL 33154		
3) Change	PS	ABE ALLOUCHE	1064 NW 3 ST		
Add			HALLANDALE, FL 33009		
Remove					
4) Change	VPT	MARTY POMPHREY	10175 COLLINS AVE		
Add			SUITE 208		
Remove			BAL HARBOUR, FL 33154		
5) Change					
Add					
Remove					
6) Change					
Add					
Pamaya					

(Attach a	<mark>ding or adding additio</mark> additional sheets, if nece	ssary). (Be	e specific)	11010.		
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fan am	endment provides for	nn ovehonge	. maalassifiaation	or concellation	of issued shows	
provisi	ons for implementing t	he amendme	ent if not contain	ed in the amend	lment itself:	24
(if)	not applicable, indicate	N/A)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<u> </u>
(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 3/21/2014	
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)	
ABRAHAM I. ALLOUCHE	
(Typed or printed name of person signing)	
PRESIDENT	

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SECRETARITY OF STATE

(Title of person signing)