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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| (Do | ocument Number) | · · · · · · · · · · · · · · · · · · · |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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Amend Cus 10 3/13/14

COVER LETTER

| TO: Amendment Section Division of Corpora | | | | | |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------------------|--|--|
| NAME OF CORPORA | TION: <u>SWEET</u> | -SPOT SUR. | FBOARDS, INC. | | |
| DOCUMENT NUMBE | DOCUMENT NUMBER: 7/40000/3/9/ | | | | |
| The enclosed Articles of | Amendment and fee are sul | omitted for filing. | | | |
| Please return all correspondent | ondence concerning this mat | ter to the following: | | | |
| | JONAT, | HAN KLOKO Name of Contact Person | ω | | |
| | | Name of Contact Person | | | |
| | SWEETSPOT | SURFBOARD | S, INC. | | |
| | SWEETSPOT SURFBOARDS, INC. | | | | |
| | 5292 NE 18 TERRACE Address | | | | |
| Address | | | | | |
| | FORT LAUDENDME, FLA. 33308 City/ State and Zip Code | | | | |
| | City/ State and Zip Code | | | | |
| bmckay 2525 @ YAHOO, COM E-mail address: (to be used for future annual report notification) | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| JONATH | AN KLOKOW | | 205-3598 | | |
| Name of | Contact Person | Area Coo | le & 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) | Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Mailir | ng Address | Street A | Address | | |
| Amen | dment Section | Amenda | ment Section | | |
| | on of Corporations | | n of Corporations | | |
| | 30x 6327 assee, FL 32314 | | Building xecutive Center Circle | | |
| ı anan | assec, FL 34314 | 2001 C | ACCULIVE CONICE CITCLE | | |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



SWEET SPOT SURFBOARDS, /NC.

(Name of Corporation as currently filed with the Florida Dept. of State) P 14 0000 13797
(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:

| name must be distinguishable and conta | in the word "corporation" | company " or "incorpore | The new |
|---------------------------------------------------------------------------------------------------|------------------------------|---------------------------|------------|
| "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association | tion "Corp," "Inc," or "Co". | A professional corporati | |
| B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A ST</u> | | (N/A) |) |
| C. Enter new mailing address, if application (Mailing address MAY BE A POST O | | (MA) | |
| If amending the registered agent and new registered agent and/or the new | | n Florida, enter the name | of the |
| Name of New Registered Agent | (N) | A) | |
| - | (Florida street ac | ddress) 9 , Florida_ | |
| New Registered Office Address: | (Civit | | (Zip Code) |
| New Registered Office Address: | | | |

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 | PT John I | Doe | |
|----------------------------|--------------|-----------------|------------------------|
| X Remove | V Mike | <u>Jones</u> | |
| _X Add | SV Sally S | <u>Smith</u> | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | _5_ | JASON KLOKOW | 5292 NE 18 TERLACE |
| Add | | | FORT LAND., FLA. 33308 |
| Remove | | | (FORT LANDERDALE) U.S. |
| 2) Change | <u>TSD</u> | JONATHAN KLOKOW | 5292 NE 18 TOWACE |
| Add | | | FORT LAWDERDARE) U.S. |
| Remove | | (1.7) | (FORT LAWDERDALE) U.S. |
| 3) Change | | -(N/A) | |
| Add | | | |
| Remove | | | |
| 4) Change | | (N/A) | |
| Add Add | | | |
| Remove | | | |
| 5) Change | | (N/A) | |
| Add | | | |
| Remove | | _ | |
| 6) Change | e | N/A) | |
| Add | | | |
| Remove | | | |

| amending or adding additi ttach additional sheets, if ned | onal Articles, enter change(s) he essary). (Be specific) | <u>ere</u> : |
|--------------------------------------------------------------|----------------------------------------------------------|-----------------------------------|
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| an amendment provides fo | an exchange, reclassification (| or cancellation of issued shares, |
| provisions for implementing | the amendment if not contained | d in the amendment itself: |
| (if not applicable, indicat | | |
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| The date of each amendment(s) adoption: | , if other than the |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| date this document was signed. | |
| Effective date <u>if applicable</u> : 3 - 9 - 14 (no more than 90 days after amendment file date) | |
| (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) (CHECK ONE) | |
| 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. | |
| Dated3 - 9 - 14 | |
| Signature Joseph Kul | |
| (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) | |
| | |
| TONATHAN KLOKOW (Typed or printed name of person signing) | |
| (Typed or printed name of person signing) | |
| PRESIDENT (Title of person signing) | |
| (Title of person signing) | |