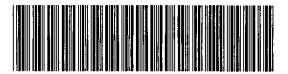
## P14000034762

(Reque	stor's Name	)
(Addres	ss)	
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PICK-UP	WAIT	MAIL.
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(Docum	nent Number	r)
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## **COVER LETTER**

	• •			
,	•	<b>COVER LETTER</b>		Ag 5
TO: Amendment Sect Division of Corp				JUL 20 AM III. 18
NAME OF CORPO	RATION: LOUGH TIDE BE	ACH WEDDINGS OF TA	MPA BAY INC	三二 四
	P14000034762			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		THE CO
Please return all corre	spondence concerning this ma	tter to the following:		
	MICHAEL J FAEHNER, ES	Q.		
		Name of Contact Person	1	<del></del>
	M FAEHNER ESQ LLC			
	<del> </del>	Firm/ Company		<del></del>
	600 BYPASS DRIVE SUITE	• •		
		Address		<del> </del>
	CLEARWATER, FL 33764			
		City/ State and Zip Cod	e	
FILI	NGS@MFAEHNER.COM			
	E-mail address: (to be us	sed for future annual report	notification)	_
For further informatio	n concerning this matter, pleas	se call:		
MICHAEL FAEHNE	R	at (	443 5190	
Name	of Contact Person	Area Co	) de & Daytime Telephone N	umber
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)	
Amo	iling Address endment Section ision of Corporations	Amend	Address Iment Section on of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment on

	to
Article	of Incorporation
	of
H TIDE REACH WEDDINGS OF TAMPA BAY INC	

P14000034762  Pursuant to the provisions of section 607.1000 its Articles of Incorporation:		Corporation (if known)		
its Articles of Incorporation:		Corporation (in allowing		
its Articles of Incorporation:	5, Florida Statutes, this F			
		Clorida Profit Corporation adopts the follow	ving ameno	iment(s) t
A. If amending name, enter the new name	of the corporation:			
	d	12 to	The	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp." "Inc," or "C	o". A professional corporation name mu		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		8815 91ST TERRACE N		
		SEMINOLE, FL 33777		
		Aladhan yayadha waxaya ahka ayaa ayaa ahaa ayaa ahaa ahaa a	·	_
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		PO Box 1083		
		Clearwater, FL 33757		_
				_
				<del></del>
<ol> <li>If amending the registered agent and/or new registered agent and/or the new reg</li> </ol>	registered office addre distered office address:	ss in Florida, enter the name of the		
· · · · · · · · · · · · · · · · · · ·	achel L. Borgman			
	8815 91st Terr. N		<del></del> -	
	(Florida stree	t uddress)	<del></del>	
New Registered Office Address:	Seminole	, Florida_3377	77	_
	(0		p Code)	-

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 = Vicc 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.

X Change	PT Jo	ohn Doe	
X Remove	<u>y</u> <u>y</u>	like Jones	
$X \wedge dd$	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP.S	ANDERSON, MELISSA	1050 STARKEY RD #104
Add			LARGO. FL 33771
X Remove			
2) X Change	P.T	BORGMAN, ADAM	PO Box 1083
Add			Clearwater, FL 33757
Remove			
3) Change	VP,S	BORGMAN, RACHEL	PO Box 1083
x Add			Clearwater, FL 33757
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

NOT APPLICABLE	
If an amendment provides for an exchange, reclassification, or cancellat provisions for implementing the amendment if not contained in the anu	ion of issued shares, endment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) OT APPLICABLE	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) OT APPLICABLE	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	wed by the sharcholders through voting groups. The following statement with voting group entitled to vote separately on the amendment(s):	1
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without whateholder action and shareholder	
Dated 14 <b>3</b>	ply 2015	
Signature		
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
A	DAM BORGMAN	
	(Typed or printed name of person signing)	**************************************
PI	RESIDENT	
_	(Title of person signing)	