P14000080573

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Blue Marlin Custom Pool & Spas Inc DOCUMENT NUMBER: P14000080573					
DOCUMENT NUMBI	ER:	<u>. </u>			
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
į	Lori Moore				
_		Name of Contact Per	rson		
(Cape Cora! Accou	unting Service	LLC		
_		Firm/ Company			
	3501-212 Del Pra	do Blvd			
_		Address			
(Cape Coral, FL 3	3901			
_		City/ State and Zip C	Code		
l mo	ore@capecorala	ccounting con	n		
	E-mail address: (to be us				
	,	•	•		
For further information	concerning this matter, pleas	e call:			
Lori Moore		at (239	, 542-2558		
Name of	Contact Person		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)	Certificate of Status		
<u>Maili</u>	ng Address	Str	eet Address		
Amendment Section		Amendment Section			
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building					
	nassee, FL 32314		1 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Blue Marlin Custom Pool & Spas Inc

(Name of Corporation as currently filed with the F	lorida Dept. of State)	
P14000080573		22 (3) Sept.
(Document Number of Corporation (f known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the	(A)
A. If amending name, enter the new name of the corporation:		
Blue Marlin Custom Pools and Spas, Inc.		The
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation	Co". A professional corporation n	or the abbrevial
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 add new registered agent and/or the new registered office address Name of New Registered Agent N/A		<u>he</u>
(Florida su	eet address)	
New Registered Office Address:	, Florida	
(City)		p Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the	e position.

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>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	P,T,8	3	Wade Muske		12200 Shoreview DR
Add					Unit 2
Remove					Matlacha, FL 33993
2) Change		_			
Remove 3) Change					
Add Remove					
4) Change		_		_	
Remove					
5) Change					
Remove					
6) Change		<u></u>	· · · · · · · · · · · · · · · · · · ·		
Remove					

E. <u>If ame</u> (Attach	nding or adding additional sheet	additional Arti	cles, enter chan (Be specific)	ge(s) here:		
No amendment to articles but please change their FEIN to 47-1974401						
			<u> </u>	<u> </u>		
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				<u>,</u>		
			·			
If an a	mendment prov	ides for an exch	ange, reclassific	cation, or cancel	lation of issued sha	ıres.
provi	sions for implen	nenting the ame	ndment if not co	ntained in the a	mendment itself:	
!/A	f not applicable,	inaicaie N/A)				
						· · · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) ad	option:	, 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 30 days after amenament file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated	210/28/2014	
Signature	Jack on water	
(By a dir	rector, president of other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
. F. F		
-	Wade Muske	
	(Typed or printed name of person signing)	
_	preside	
_	(Title of person signing)	-