## P14000082730

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(Ad	dress)	
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## COVER LETTER .

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: ANNA MARIA IS	SLAND WATERSPORTS	NC
	MBER: P14000082730		
	des of Amendment and the are si	ubmitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
	Barbara Groves		
		Name of Contact Fersor	n
	Anna Maria Island Waterspo	orts Inc	
	<u> </u>	Firm/ Company	
	505 56th St	, , , , , , , , , , , , , , , , , , , ,	
		Address	
	Holmes Beach, Florida 3421	7	
	<del></del>	City/ State and Zip Cod	e
	amiwatersports@gmail.com		
		sed for future annual report	notification)
For further inform	ation concerning this matter, plea	ise call;	
Barbara Groves		815 at (	291-7217
			de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to

FILED

Articles of Incorporation of

2020 OCT 13 PM 6: 48

ANNA MARIA ISLAND WATERSPORTS INC

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r as currently thi	With the Biograms	episor State)	
		<del>.</del>	<u> </u>
nt Number of Co	rporation (if known)		
Statutes, this Flor	ida Profit Corporation	adopts the following	ig amendment(s) t
poration:			
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poration," "comp or "Co". A pr ation "P.A,"	oany," or "incorporate ofessional corporation	d" or the abbreviation in the must contains the must contains the cont	on "Corp.," in the word
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	,	, Florida	<del></del>
Юф	7	(Zip )	Code)
torad tuanti			
im familiar with	and accept the obligati	ions of the position.	
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<u>_</u>			_
ire of New Regist	ered Agent, if changin	g	
	nt Number of Contatutes, this Flor  poration:  poration," "comp or "Co". A pre- ntion "P.A."  ESS )  d office address:  (Florida street address:  (Florida street address:	poration:  poration:  poration:  "Company," or "incorporate or "Co". A professional corporation ution "P.A."  ESS )  d office address in Florida, enter the selice address:  (Florida street address)  (City)  ered Agent: on familiar with and accept the obligate	tatutes, this Florida Profit Corporation adopts the following poration:  Doration:  Dora

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc	
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	VP	Daniel Groves	12112 45th Ave W
x Add			Cortez, Fl 34215
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
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6) Change			
Add			
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	ng additional Artic ets, if necessary).	(Be specific)				
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The date of each amendment(s	) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval,	s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
October Dated	Davine Llave	
Signature	a director, president or other officer – if directors or officers have not been	<del></del>
sele	eted, by an incorporator – if in the hands of a receiver, trustee, or other combined fiduciary by that fiduciary)	rt
	Barbara Groves	
	(Typed or printed name of person signing)	<del></del> -
	President	
	(Title of person signing)	