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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section-Division of Corporations

NAME OF CORPOR	ATION: Floral	City Bait	Ftackle WI	nolesale Inc.
DOCUMENT NUMB	01110 -	085512	<u> </u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	♣.	
Please return all corres	pondence concerning this ma	tter to the following:		
-	Michelle	MocK Name of Contact Person	n	_
-	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	4.4	
-	7737 5,0	Icl Floral Address	City Kd	
	Floral City	FL 34/	436	ALL TO THE TANK THE T
_5,		18 Q 4a hoo, sed for future annual report		8 T
For further information	concerning this matter, please	se call:		2 2 D
Michelle Name o	Moc K f Contact Person	at (<u>352</u> Area Co		
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	2\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Ma</u> il	ing Address	く Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



Floral City Bait & Tackle Wholesale Inc.
(Name of Corporation as currently filed with the Florida Dept. of State) 14000<u>085512</u> (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: A. If amending name, enter the new name of the corporation: Floral City Bait and Tackle Outfitters Inche new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." Michelle Mack B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 7737 S. Old Floral City Rd. Floral City FL 34436 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Michelle Mock 7737 S. Old Floral City Rd
(Florida street address) New Registered Office Address: Florida 34436
(City), Florida 34436
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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.

Mike Jones, V as Kemo	ve, and Sally Smi	ith, SV as an Add.	
Example: X Change	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>PS</u>	Michelle Mock	7613 W.C. 48
X Add			Bushnell FL
Remove			33513
2) Change		Charles Wood	8800 E. Orange Ave
Add			Floral City FL
Remove			34436
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
. —			
6) L Change			
Add			
Remove			

attach <i>additio</i>	r adding additional Ai nal sheets, if necessary)). (Be specific)	·		
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rovisions fo	ent provides for an exc r implementing the am plicable, indicate N/A)	change, reclassifi wendment if not c	cation, or cancel ontained in the a	lation of issued mendment itsel	shares, f:
					
					

The date of each amendment(s) adoption:	_ if other	than the
date this document was signed.		
Effective date if applicable: 1/-17-2014 (no more than 90 days after amendment file date)	_	
(no more than 90 days after amenament fite 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)		
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 11-17-14		
Signature Chille MOCK	_	
(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)	_	
(Typed or printed name of person signing)	- :	77
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(Title of person signing)	~ co :	Ţ';
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