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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: PCRG Boats Corp				
DOCUMENT NUMBER: _	P14000090362				
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
Humberto J. Moreno,	J.D.				
	((Name of Contact Person	n)		
Moreno & Associates					
		(Firm/ Company)			
3600 Red Road, Ste 301					
		(Address)			
Miramar, FL 33025					
	(City/ State and Zip Cod	e)		
ac	lmin@accountingbwt	ba.com			
E	-mail address: (to be used	for future annual report	notification)		
For further information conc	erning this matter, please of	eall:			
Humberto J. Moreno	o, J.D.	at (954) 603-89	78 x 8978	
	(Name of Contact Person)			(Daytime Telephone Nun	nber)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida Depart	artment of St	ate:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifie	ate of Status d Copy onal Copy is	
B4 - 111 4		0			

Mailing Address

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

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

Articles of Amendment to Articles of Incorporation of

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PCRG Box	ıts Corp	307.114
(Name of Corporation as curren	tly filed with the	e Florida Dept.jof State)
P14000090362		FLURIDA
(Document Numb	er of Corporation	ı (if known)
Pursuant to the provisions of section 617.1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this <i>Florida N</i>	lot For Profit Corporation adopts the following
a. If amending name, enter the new name of the corporat	ion:	
		The new
name must be distinguishable and contain the word "corpora	tion" or "incorp	orated" or the abbreviation "Corp." or "Inc."
'Company" or "Co." may not be used in the name.		
3. Enter new principal office address, if applicable:	8294 NW 64	Street
Principal office address <u>MUST BE A STREET ADDRESS</u>) Miami, FL	33166
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered offi		orida, enter the name of the
new registered agent and/or the new registered office a	iddress:	
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		121 - 24 -
	(City)	, Florida (Zip Code)
	(01.9)	(2.7 0000)
New Registered Agent's Signature, if changing Registered		
herehy accept the appointment as registered agent. I am fa	miliar with and a	accept the obligations of the position.
S	ignature 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.

Example: X Change X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Director	William Sanchez	7400 West Flagler Street
X Add			Miami, FL 33144
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			- <u>-</u> .
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) date this document was signed.	adoption:	if other than the
Effective date if applicable:		
,	íno more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will to Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
ExiThe amendment(s) was/were was/were sufficient for appre	adopted by the members and the number of votes cast for the amendment(s) aval.	
☐ There are no members or me adopted by the board of dire	imbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated <u>8/14/20</u>	15	
Signature X	e-	
(By the ch have not	airman or vice chairman of the hoard, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or it appointed fiduciary by that fiduciary)	
Hill	onsnagen	
	(Typed or printed name of person signing)	
ta	rector	
	(Title of person signing)	