## P14000092967

(Re	equestor's Name)			
, (Ac	ldress)			
(Ac	idress)			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION:Ship Servi	ce Inc				
DOCUMENT NUME	BER: P14000092967					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
•	MARK CHAVES					
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1			
	MARCUM LLP					
	Firm/ Company					
	One SE Third Avenue, Suite 1100					
	Address					
	Miami, FL 33131					
City/ State and Zip Code						
Mark	.Chaves@marcumllp.com		/			
	E-mail address: (to be us	sed for future annual report	notification)			
For forther information	n concerning this matter, pleas	oo aalle				
ror turther information	concerning this matter, pieas	se can:				
MARK CHAVES		at ( 305	995-9700 de & Daytime Telephone Number			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r 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)			
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

Jacuzzi Ship Service Inc				
( <u>Name</u>	of Corporation as currently	filed with the Florida Dep	t. of State)	
P14000092967				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Florida Profit Corporation a	dopts the following amer	ıdment(s) to
A. If amending name, enter the new n	ame of the corporation:			
JSS Ship Service Inc.			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corpor	orated" or the abbrevio	ation
B. Enter new principal office address, (Principal office address MUST BE A S		14901 SW 137Th St. Uni	it 2, Miami, FL 33196	<del></del>
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)  D. If amonding the registered exact as	OFFICE BOX)	One SE Third Avenue, Su	- <u> </u>	17 <sub>  Å</sub>
D. If amending the registered agent an new registered agent and/or the new		ess in Fiorida, enter the nai	me or the	AS THE
Name of New Registered Agent	N/A		77.50 77.50 77.50	R IO PR
				₩ ₩ ₩
New Registered Office Address:	(Florida street) One SE Third Avenue, Suite		Florida 33131	: 27
	(City)		(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as registered.	hanging Registered Agent: tered agent. I am familiar w	ith and accept the obligation	ns of the position.	
	Signature of New Re	gistered 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	DТ	John Doe	
	<u>PT</u>		
. X Remove	V	Mike Jones	
$X  ext{ Add}$	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s .
1) N/A Change			
Add			
Remove			
2) N/A Change			
Add			
Remove			
3) N/A Change			
Add	-		
Remove			<del></del>
4) N/A Change			
Add			
Remove			
5) N/A Change			
Add			
Remove			
6) N/A Change		_	
		<del>-</del>	
Add			
Remove			

<b>.</b>				
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			<del></del>	
	<del></del>			
f an amendment provides for an exc	hange, reclassification,	or cancellation of is	sued shares,	
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not containe	d in the amendmen	t itself:	
<u> </u>				
	· · · · · · · · · · · · · · · · · · ·	··		
				_
		-		

03/13/2017	
The date of each amendment(s) adoption: date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	ll not be listed as the
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"	
(voling 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 Signature Caucal Signature	
(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)	<del></del>
Gianpietro Da Re	
(Typed or printed name of person signing)	
President	
(Title of person signing)	***