P14000101547

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ÄSSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corp	porations			
NAME OF CORPO	RATION: Dive Site Internation	onal INC		
	IBER: P14000101547			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Shawn Dockery			
		Name of Contact Person	1	
	Reg-Mount INC			
		Firm/ Company	_	
	4056 Embers Landing			
	The state of the s	Address		
	Pensacola, FL 32505			
	4	City' State and Zip Cod	· ·	
spd1	202004aa yahoo,com			
<u>, , , , , , , , , , , , , , , , , , , </u>		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Shawn Dockery		850 at (de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐S43.75 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 Tullahassee, FL 32314		Street Address Amendment Section Division of Corporations Clitton Building 2661 Executive Center Circle		
		Tallah	assee, FL 32301	

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Articles of Amendment to Articles of Incorporation 16 JUN 24 PM 4: 18
SEGRETARY OF STATE
TALLAHASSEE, FLORIDS

Dive Site International INC	WILLIAM SEE FLORIDM
(Name of Corporation a	s currently filed with the Florida Dept, of State)
P14000101547	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	states, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpu	ration:
Reg-Mount INC	The new
name must be distinguishable and contain the word ""Corp.," "bre.," or Co.," or the designation "Corp." "word "chariered," "professional association," or the abb	corporation," "company," or "incorporated" or the abbreviation The," or "Co". A professional corporation name must contain the reviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ss</u>)
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 off	ce address:
Name of New Registered Agent	
Control of the state of the sta	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. To	red Agent: in familiar with and accept the obligations of the position.

Signature of New Registered Agent of 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 = ChiefExecutive Officer: CFO = Chief Financial Officer. If an officeralizector 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: \(\sum Change	<u> </u>	<u>Iohn Doc</u>	
X Remove	\underline{V}	Mike Jones	
X Add	$\underline{\mathbf{S}}\underline{\mathbf{Y}}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
11 Change			
Add			
Remove			PILL PILL PILL PILL PILL PILL PILL PILL
2) Change	· <u>-</u>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
			A. C.
Remove			

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·	- W. No. 246 Michigan					
· 						
	provides for an ex	change, reclassi	fication, or cance	Hation of issued s	hares,	
'an amendment	<u>uplementing the an</u>	nendment if not	contained in the	<u>amendment itself</u>	<u> </u>	
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The date of each amendment(s) adoption:	if other than the
•	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 50 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the shareholders. The number of votes east 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):	u.
"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.	
07/15/16	
Signature Shan Dock	
(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)	
Shawn Dockery	
(Typed or printed name of person signing)	
(00)	
(Title of ear on significan	-