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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fisheye Capital, Ir	nc		
DOCUMENT NUM	BER: P15000043058			
	of Amendment and fee are su	bmitted for fili	ng.	
Please return all corre	spondence concerning this ma	tter to the follo	owing:	
	Thomas J. Bellante			
		Name of C	ontact Persor	n
	Garyn Angel Enterprises			
		Firm/ (Company	
	5471 Richey Dr.			
		Λd	dress	
	Port Richey, FL 34668			
		City/ State	and Zip Cod	e
thail	ante@magicalbutter.com			
	E-mail address: (to be us	ed for future a	nnual report	notification)
	1man address, (w be d.	sed for fatale a	illiaar rejxire	TRACTICAL RATE
For further informatic	on concerning this matter, pleas	se call:		
Thomas J. Bellante		at e	813	545-7453
Name	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the	Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Additional (Additional enclosed)	Copy al copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address				Address
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2018 OCT 23 PM 4: 46

Fisheye Capital, Inc.		SPORTAR	YOFSTATE
(Name o	of Corporation as currently	filed with the Florida Dept. of State) LAHA	
P15000043058			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
	ation "Corp." "Inc." or "C	n," "company," or "incorporated" or the at Co". A professional corporation name must c P.A."	hbreviation
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
		·	_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	<u>cable:</u> <u>OFFICE BOX</u>)		
D. If amending the registered agent an new registered agent and/or the new			
	Thomas J. Bellante		
Name of New Registered Agent	5471 Richey Dr.		•
	(Florida stre	eet address)	-
New Registered Office Address:	Port Richey	Florida 34668	
		(City) Zip (~ode)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	ered agent. Lam familiar w	with and accept the obligations of the position.	
	Mun II	the second second	
/_		egistered 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.

X Change	$\overline{\text{bL}}$	John Doe	
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	PTSD	Vanhook, William, CPA	5471 Richey Dr.
Add			Port Richey, FL 34668
X Remove			
2) Change	PTSD	Bellante, Thomas, CPA	5471 Richey Dr.
X Add			Port Richey, FL 34668
Remove			
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

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	<u>. </u>		
an amendment provides for an exch	ange, reclassification, or ca	ncellation of issued share	s.
rovisions for implementing the ame	adment if not contained in t	he amendment itself:	_
(if not applicable, indicate N/A)			
			
		<u> </u>	
		.	
			
			·

The date of each amendment(s) a	09/01/2018 dontion:	, if other than the
date this document was signed.	<u></u>	If other than the
Effective date <u>if applicable</u> :		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendme afficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	vment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
10/10/201	8	
Dated	16 44 1	
Signature	1 1000	
selecto	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other c	ourt
арроіі	nted fiduciary by that fiduciary)	
	Thomas J. Bellante	
	(Typed or printed name of person signing)	
	CFO	
	(Title of person signing)	