## P15000076689

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(1	business Entity Name;	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Unitec Marine Inc			
	P15000076689			
DOCUMENT NUMBER:				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Jonas Lindkvist				
	(	Name of Contact P	erson)	
Unitec Marine Inc				
		(Firm/ Company	y)	
1241 Stirling Road Suite #1	12			
	•	(Address)		
Dania Beach, Fl 33004				
	(	City/ State and Zip	Code)	
admin@unitecmarine.com				
E	-mail address: (to be used	for future annual rep	port notification	1)
For further information conc	erning this matter, please of	eall:		
Jonas Lindkvist		at	954	701 9355
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida	Department of	State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy in enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	Address	St	reet 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 of

tly filed with the Florid	la Dept. of State)	
per of Corporation (if kno	own)	
es, this <i>Florida Not For</i>	Profit Corporation adopts the	following
ion:		
		The new
ttion" or "incorporated"	or the abbreviation "Corp." o	
N/A		
)		
N/A		
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	nter the name of the	
address:		
(Flor	ida street address)	<del></del>
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(City)	(Zip Code)	
Agent:		
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	<b>*25</b>	1.1
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agnature oj New Kegister	red Agent, if changing	iv into
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Page 1 of 4	بيا	المحصد
	er of Corporation (if knows, this Florida Not Formion:  tion:  N/A  N/A  N/A  N/A  Ce address in Florida, enddress:  (Florida (City))  Agent: miliar with and accept the ignature of New Register	N/A  N/A  N/A  N/A  (Florida, enter the name of the address:  (Florida street address)  (Florida street address)  Agent: miliar with and accept the obligations of the position.  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	<u>V</u> <u>Mil</u>	n <u>Doe</u> ce Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	V .	Nils Dahlstrand	Persiljevagen 2
x Add			Oxie, SK 23838 SE
Remove			
2) Change			·
Add			
Remove			
3) Change			
Add			<del></del>
Remove			
4) Change			·
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5) Change			· .
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6)Change	<del></del>		· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

(anuch dadition	adding additional Articles, enter changed all sheets, if necessary). (Be specific)		
N/A			•
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The date of each amendment	(s) adoption:	, if other than th
date this document was signed	•	
	8/10/2016	1 , , ,
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements, this does not meet the applicable statutory filing requirements.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendn proval.	nent(s)
☐ There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/v	were
Dated 8/10/2	2016	
Signature	an Later to the state of the st	
have r	chairman or vice chairman of the board, president or other officer-if dire to been selected, by an incorporator — if in the hands of a receiver, trusted court appointed fiduciary by that fiduciary)	
Jor	as Lindkvist	
	(Typed or printed name of person signing)	
Of	ñcer	
_	(Title of passen signing)	