# P15000094433

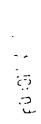
| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Coomes 2 may rame)                     |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

Office Use Only



100335123681

10/07/19--01091--022 \*\*05.00



Mama Ch8

OCT 26 2019

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wendy Schmitt Name of Contact Person Starboard Home, Inc 1003 US Hwy 19 Address Palm Harbor FL 34684

City/ State and Zip Code

Wendy @ my Starbo and home. Com

E-mail address: (to be used for functe annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

|   | c |
|---|---|
| n | 1 |
|   |   |

| My Starbo   | and thomp inc                           | <b>_</b>                             |
|---|---|--------------------------------------|
| (Name of Corporation as currently f   | iled with the Florida Dept. of State)   |                                      |
| P 15000   | 00 94477                                |                                      |
| (Document Number of C   | orporation (if known)                   |                                      |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:  | orida Profit Corporation adopts the fo  | Howing amendment(s) to               |
| A. If amending name, enter the new name of the corporation:   |   |                                      |
| name must be distinguishable and contain the word "corporation,"  | d Home, Inc                             | The new                              |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P  B. Enter new principal office address, if applicable: | ". A professional corporation name      | the abbreviation<br>must contain the |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |   |                                      |
|   |   |                                      |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | N/A                                     | <u></u>                              |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:   | s in Florida, enter the name of the     | <u> </u>                             |
| Name of New Registered Agent  |   |                                      |
| (Floridal street  | uddress)                                |                                      |
| New Registered Office Address: (C   | K. Florida, Florida                     | (Zip Cofte)                          |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with   | h and accept the obligations of the pov | sition.                              |
| N   | /A                                      | _ <del></del>                        |
| Signature of New Rek  | eistered 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             | <u>PT</u>    | John Doc    |                 |
|-------------------------------|--------------|-------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jones  |                 |
| X Add                         | <u>\$V</u>   | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |              | N/A         |                 |
| Add                           |              | ,           |                 |
| Remove                        |              |             | <del></del>     |
| 2) Change                     |              | N (A        |                 |
| Add                           |              | J           |                 |
| Remove                        |              |             |                 |
| 3) Change                     |              | N/A         |                 |
| Add                           |              | '           |                 |
| Remove                        |              | ,           |                 |
| 4) Change                     |              | N/A         |                 |
| Add                           |              | 1           |                 |
| Remove                        |              |             |                 |
| 5) Change                     |              | N/A         | <del>-</del>    |
| Add                           |              | 1           |                 |
| Remove                        |              |             |                 |
| 6) Change                     |              | N/A         |                 |
| Add                           |              | 1           |                 |
| Remove                        |              |             |                 |

| If amending or adding additional Articles. (Attach additional sheets, if necessary). (B | Ne specific)                |                           |             |
|---|-----------------------------|---------------------------|-------------|
|   |                             |                           |             |
|   |                             |                           |             |
|   |                             |                           |             |
|   |                             | •                         |             |
|   |                             |                           |             |
|   |                             |                           | -           |
| <del> </del>  |                             |                           |             |
|   |                             |                           |             |
| <del></del>   |                             |                           |             |
|   |                             |                           |             |
|   |                             |                           | <del></del> |
|   |                             |                           |             |
|   |                             |                           |             |
|   |                             |                           |             |
|   | ****                        |                           | ····        |
|   |                             |                           |             |
| If an amendment provides for an exchang   | ge, reclassification, or ce | ancellation of issued sha | res,        |
| provisions for implementing the amendm<br>(if not applicable, indicate N/A)             | nent if not contained in    | the amendment itself:     |             |
|   | NIA                         |                           |             |
|   |                             |                           |             |
|   |                             |                           |             |
|   |                             |                           |             |
| <del></del>   |                             |                           | <del></del> |
|   |                             |                           |             |
|   |                             |                           |             |
|   |                             |                           |             |

| The date of each amendment(s) adoption:, if other than   | the |
|--|-----|
| date this document was signed.   |     |
| 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 will not be listed as document's effective date on the Department of State's records.       | 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"  (voting group)  |     |
| (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.   |     |
| Dated  |     |
| Signature Welch chmidt   |     |
| (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)   |     |
|  |     |
| wrendy Schmidt   |     |
| (Typed or printed name of person signing)  |     |
| President  |     |
| (Title of person signing)  |     |