P16000017203

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(C)	JCharles (Dhar	- 10
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Special Instructions to	Filing Officer:	
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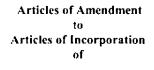
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COVER LETTER

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TO: Amendment Secti Division of Corpo				AN OCT TO AH ION SO
NAME OF CORPOR	AATION: Panacea Oyster Co	op Corporation		
DOCUMENT NUMB				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		Q ·
Please return all corres	pondence concerning this ma	tter to the following:		ھ≥
	Pam Portwood			
,		Name of Contact Person	n	•
	Panacea Oyster Co-op Corpo		,	
		Firm/ Company		-
	P. O. Box 341	t iniz company		
•		Address		-
	D	Addiess		
	Panacea, FL 32346			
		City/ State and Zip Cod	e	•
pportv	vood@panaceaoysters.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
			i	
Pam Portwood		850 at (544-6133	
Name o	of Contact Person	Area Co	de & Daytime Telephone Numbe	т
Enclosed is a check for	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)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ling Address Indinent Section Ission of Corporations Box 6327 Islanssee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle	
1 4114	umosco, I L J2J14	2001 E	vecative Cettei Cucie	

Tallahassee, FL 32301



Panacea Oyster Co-op Corporation

(Name of Corporation as current)	y filed with the Florida Dept. of	State)
P16000017203		3
(Document Number o	f Corporation (if known)	υ, υ,
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	s the following amendment(s) to
A. If amending name, enter the new name of the corporation: N/A		The new
name must be distinguishable and contain the word "corporatio" (Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address	ress in Florida, enter the name of	f the
Name of New Registered Agent N/A		
(Florida str	reet address)	
New Registered Office Address:	, Flo	orida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	: with and accept the obligations of i	the position.
Signature of New R	Pevistered Agent if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/direct	or 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> <u>John</u>	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Rancher	Denita Sassor	16 Chickasaw St.
Add			Panacea, FL 32346
X Remove			-
2) Change	Officer	Ben Lovel	4409 Coastal Highway
X Add			Crawfordville, FL 32327
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issu	ned shares.
provisions for implementing the amendment if not contained in the amendment in	tself:
(if not applicable, indicate N/A)	
N/A	
	_

N/A	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
N/A Effective date if applicable:	
(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date 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 cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approv	al
by	."
by	
The amendment(s) was/were adopted by the board of directors without shareholder ac action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
October 4, 2017 Dated	
(By a director, president or other officer – if directors or officered; to selected, by an incorporator – if in the hands of a receiver, to appointed fiduciary by that fiduciary)	
Robin Olin	
(Typed or printed name of person signing	;)
CEO	
(Title of person signing)	