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COVER LETTER

TO: Amendment Section

Division of Corporations The Captain's Cut, Inc. 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: Melinda Wimberley Name of Contact Person The Captain's Cut, Inc. Firm/ Company 1640 SW 129 Way Address Ft. Lauderdale, Florida 33325 City/ State and Zip Code info@sportfishreelcovers.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Melinda Wimberley Area Code & Daytime Telephone Number Name of Contact Person 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** Street Address **Amendment Section Amendment Section Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

The Captain's Cut, Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P16000019772	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	27() (99)
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	# 1
	AAA B
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	デザウ
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CEO	Michael W. Annese	11910 NW 33 ST.
X Add			Sunrise, FI 33323
Remove			
2) Change	СЕО	Mark T. Wimberley	1640 SW 129 Way
XAdd			Davie, Fl 33325
Remove			
3) Change	CEO	Kaitlin V. Wimberley	1640 SW 129 Way
X Add			Davie, Fl 33325
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) (Attach additional sheets, if necessary). (Be specific)	
- 	
	•
•	
F. If an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	n, or cancellation of issued shares, ned in the amendment itself:
Mark A. Wimberley, President, 35%	
Melinda L. Wimberley, Vice-President, 35%	
Michael W. Annese, CEO, 10%	
Michael W. Annese, CEO, 10% Mark T. Wimberley, CEO, 10%	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
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 date partment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	;)
	oproved by the shareholders through voting groups. The following stateme are each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes case	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	•
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
9/7/16 Dated		
Signature	Melinda Wirberley	
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other couranted fiduciary by that fiduciary)	t
	Melinda Wimberley	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	