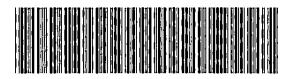
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DANIEL JOLITZ (CHARTERS INC.		
DOCUMENT NUM	BER: P16000040313			
	s of Amendment and fee are sul	bmitted for filing.		
Please return all corr	espondence concerning this mat	tter to the following:	·	
	DANIEL JOLITZ			
	-	Name of Contact Person		
		Firm/ Company		
	713 JAMAICA CIR W			
		Address		
	APOLLO BEACH, FL 33572	2	<u>. </u>	
		City/ State and Zip Code	1	
	SPEARGULF@YAHOO.CO	ЭМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
RON BRACE		at (<u></u>	632-8200	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

of

DANIEL JOLITZ CHARTERS INC.				
(Name o	f Corporation as currentl	y filed with the Florida Dept. of State)		
P16000040313			 	
	(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this .	Florida Profit Corporation adopts the fo		
A. If amending name, enter the new na	ime of the corporation:			
AMI FAMILY FISHING INC.			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co". 2	I professional corporation name must	reviation "Corp" contain the word	
		713 JAMAICA CIR W		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		APOLLO BEACH FL 33572		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	<u>cable:</u> OFFICE B <u>OX</u>)	713 JAMAICA CIR W		
(Manning address (Manning and Manning and		APOLLO BEACH FL 33572		
		-		
D. If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the		
new registered agent and/or the new registered office address: DANIEL JOLITZ		<u>-</u>		
Name of New Registered Agent			<u> </u>	
	713 JAMAICA CIR W			
		veet address)		
	APOLLO BEACH Florid		3572	
New Registered Office Address:	ATOREO BEACT	, Florida	(Zip Code)	

Check if applicable

 \blacksquare The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John Doc	₹	
X Remove	<u>V</u>	Mike Jor	n <u>es</u>	
X Add	<u>sv</u>	Sally Sm	nith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				-
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	onal sheets, if necessa	ıry). (Be specific)			
						
			 			
					 -	
	<u>.</u>					
						_
	<u> </u>		-			
				_		
			_			
an amend	ment provides for an	<u>i exchange, reclas</u> :	sification, or can	icellation of issu	ied shares,	
<u>provisions (</u>	or implementing the	<u>amendinent if no</u>	<u>it contained in tl</u>	<u>he amendment i</u>	itsett:	
(if not a	pplicable, indicate N/	(A)				
	-				-3	
						
						

.

The date of each amendment(s)	doption:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	(no more than 90 days after amendm	vent file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were acation was not required.	opted by the incorporators, or board of directors wi	ithout shareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	opted by the shareholders. The number of votes caufficient for approval.	ist for the amendment(s)
☐ The amendment(s) was/were a must be separately provided for	proved by the shareholders through voting groups. reach voting group entitled to vote separately on to	The following statement he amendment(s):
"The number of votes ca	t for the amendment(s) was/were sufficient for app	roval
by		
	(voting group)	
9/3/2020 Dated		
selec	director, president or other officer – if directors or or ed, by an incorporator – if in the hands of a receive need fiduciary by that fiduciary)	officers have not been er, trustee, or other court
71.1	DANIEL JOLITZ	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	