## P16 0000 40429

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Hame)
(Document Number)
(Boodinest Hamber)
Cadification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400375044594

10/20/21--01815--005 \*\*35.00

2021 OCT 20 PM 5: 33

NOV 1 2021

S. PRATHER

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: AQUA MARIN IN	C.		
	IBER: P16000040429			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	DIANA BLASCHZYK			
		Name of Contact Persor	1	
	HILL & COMPANY, CPA, I	, <sub>A</sub>		
		Firm/ Company		
	804 NICHOLAS PKWY E, S	TE I		
		Address		
	CAPE CORAL, FLORIDA 3	3990		
	4) 4)	City/ State and Zip Code	2	
	DBLASCHZYK@HILLCOC	PA.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call:		
THOMAS W. HILL		at ( <sup>239</sup>	) 549-2444 de & Daytime Telephone Number	
Name 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:	
\$35 Filing Fee	☐S43.75 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 οſ AOUA MARIN INC. (Name of Corporation as currently filed with the Florida Dept. of State) ښ P16000040429 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: BLUE OCEAN BREEZE INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> 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 Do	<u>DC</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change				
Add				<del></del>
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
/A	
	- · · · · · · · · · · · · · · · · · · ·
	<del></del>
<del></del>	
If an amandment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<sup>//</sup> A	

• .

The date of each amendment(s) adop	tion:	_, if	other	than the
date this document was signed.				
Effective date if applicable:				
<del>-</del>	(no more than 90 days after amendment file date)			
<b>Note:</b> If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date will truent of State's records.	not b	e liste	d as the
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and	share	holder	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) rient for approval.			
	red by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	T4.,		
"The number of votes cast for	the amendment(s) was/were sufficient for approval	1. A. C. V.	0 130	
by	(voting group)	ARY	2021 OCT 20	FILE
DatedSignature	10/18/2021 And	OF STATE	PH 5: 33	Ö
(By a direc selected, b	etor, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)			
Ai	RMIN BURCHARDI			
<del></del>	(Typed or printed name of person signing)			
PR	RESIDENT			
_	(Title of person signing)			