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SECRETARY OF STAIL
STUBBLE OF CORPORATION

JUL 29 2016

C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: Superior Aquatic Training Inc DOCUMENT NUMBER: P 260000 50 765
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Superior Aguath Training Firm/Company 6463 Button Creek Cir Address Lake With F1 33463 City/ State and Zip Code Some the Blood of Omail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sheila Newton at (50) 603-3073 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Service Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

to

Articles of Incorporation of

FIL SECREFARY IVISION OF C	OF ST ORPOR	i (A) T,4.))S.
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Superior F	aduate	Training	Too	JIVISTON OF CLIRE DA
(Name of	Corporation as curr	ently filed with the F	lorida Dept. of St	nte) 2015 JUL 20 AM
P16000	050705	•		
1 4 9000		er of Corporation (if k	nown)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes,	this <i>Florida Profit Co</i>	rporation adopts th	ne following amendment(s)
A. If amending name, enter the new nam	e of the corporation	<u>:</u>		
WIA				The new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	on "Corp," "Inc," o	or "Co". A professio	or "incorporated" onal corporation n	or the abbreviation
B. Enter new principal office address, if a (Principal office address MUST BE A STR		N/1+		
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>		NA		
D. If amending the registered agent and/onew registered agent and/or the new r			ter the name of th	<u>ne</u>
Name of New Registered Agent	NA			
_	(Florid	a street address)		<u></u>
New Registered Office Address:	NA		, Florid	da.
New Registerea Office Address.	/ /	(City)	, 110110	(Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere			e obligations of the	position.
	Signature of Ne	w Registered Agent, ij	f changing	

address of each Officer (Attach additional sheets Please note the officer/d P = President; V= Vice Executive Officer, CFO held. President, Treasure Changes should be noted	and/or I s, if neces irector ti Presider = Chief er, Direct in the fa aves the	Director be sary) the by the factor of the factor of the factor would be corporation to the factor would be corporation of the factor would be corporation of the factor would be corporation of the factor of the f	veing added: first letter of the office title: asurer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more to be PTD. nanner. Currently John Doe is listed as the I on, Sally Smith is named the V and S. These s	rustee; C = Chairman or Clerk; CEO = Chief han one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	ρ	_	Thomas S Newton	6463 Burton Creek Ur Lake Wiesth C1.33463
Remove				
2) Change Add Remove				
3) Change Add Remove		_		
4) Change Add				
Remove 5) Change Add Remove	•	_		
6) Change Add				

__ Remove

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	E. <u>If amendin</u> (Attach <i>add</i> :	g or adding ac	lditional Artic	cles, enter change	ge(s) here:			
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The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file daté) VISION OF CORDORATION
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ 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
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 211 18, 2016
Signature Sheil Mento
(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)
$\bigcap_{i=1}^{n}$
Dheila Mewton
(Typed or printed name of person signing)
(Title of person signing)