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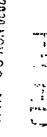


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S. YOUNG

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COVER LETTER

TO: Amendment Section _ Division of Corporations NAME OF CORPORATION: Superior Aquatic Training Inc. DOCUMENT NUMBER: ______ P16000056765 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Superior Aquatic Training Inc. 6463 Barton Creek Circle
Address Lake Worth FL 33463
City/State and Zip Code Superior aquatic training @ gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 603 3673

Area Code & Daytime Telephone Number Sheila Newton 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) 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

to

Articles of Incorporation

of

Superior Aguatic Train (Name of Corporation as currently	ing Inc		
	y filet with the Florida D	ept. of State)	
P16000056765			
(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) to
A. If amending name, enter the new name of the corporation:			an)
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporate professional corporation	ed" or the abbreviation n name must contain	The new n "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A		
			2 2 2 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>	TO THE
			<u> </u>
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		name of the	<u>=</u> \.
Name of New Registered Agent Name			
(Florida stre	et address)		
New Registered Office Address:	Clini	, Florida	oda)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w NA Signature of New Re	•		94e)
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (

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: <u>X</u> 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	<u>Name</u>	Address
1) X Change	<u>VP</u>	Sheila Newton	6463 Barton Creek Circl Lake Worth FZ, 33463
Add			Lake Worth TL, 33463
Remove 2) Change Add	P	Thomas 5. Newton	6463 Barton Creek Circle Lake Worth, FL 33463
X Remove 3 Change X Add	P	Sheila Newton	6463 Barton Creek Circle Lake Worth, FL 33463
Remove 4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articles, enter c	hange(s) here:					
tach additional sheets, if necessary). (Be specifi	c _i					
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NA						
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n amendment provides for an exchange, reclas ovisions for implementing the amendment if no	<u>sification, or canc</u> at contained in the	ellation of issued amendment its	<u>1 shares,</u> elf:			
(if not applicable, indicate N/A)			· -			
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The date of each amendment(s) adop	otion: if other than th
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 bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will not be listed as the runent of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
☐ The amendment(s) was/were appro must be separately provided for ea	ved by the shareholders through voting groups. The following statement ch 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	······································
	(voting group)
Dated ////6/ Signature	Their a Newston
(By a dire	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	fiduciary by that fiduciary)
	Sheila Newton
_	(Typed or printed name of person signing)
_	Vice President
	(Title of person signing)