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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** NAME OF CORPORATION: Ocean Beverages, Inc **DOCUMENT NUMBER:** P1600071973 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KOESMAWATIE BHONDOE Name of Contact Person OCEAN BEVERAGES, INC. Firm/Company 1029 N Federal Hwy., Ft. Lauderdale, FL 33304 Address Ft. Lauderdale, FL, 33304 City/ State and Zip Code hildabhondoe@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 ) 260-6481

Area Code & Daytime Telephone Number KOESMAWATIE BHONDE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** 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 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Ocean Beverages, Inc.

17 MAY 16 PH 4: 55

(Name of Corporation as currently filed with the Florida Dept. of State) P16000071973 (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: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 1029 N. Federal Hwy. (Mailing address MAY BE A POST OFFICE BOX) Ft. Lauderdale. FL. 33304 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: KOESMAWATIE BHONDOE Name of New Registered Agent 1029 N. Federal Hwy., Ft. Lauderdale, FL. 33304 (Florida street address) New Registered Office Address: Florida 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.

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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	PD	KOESMAWATIE BHONDOE	1029 N. Federal Hwy.	
X Add			Ft. Lauderdale, FL 33304	
Remove				
2) X Change	v	MONZUR H. KHAN	1018 NW 125th AVE	
Add			Sunrise, FL 33323	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
5) Change				
Add				
Remove				
Komove				
6) Change				
Add				
Remove				

(Att	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
If a	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)

The date of each amendment(s) adoption:date this document was signed.	, if other than th
date this document was signed.	
Effective date if applicable:	6 (0.14)
(no more than 90 day:	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable adocument's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	per of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through v must be separately provided for each voting group entitled to vote s	
"The number of votes cast for the amendment(s) was/were suff	icient for approval
by	, pa
by	
☐ The amendment(s) was/were adopted by the board of directors witho action was not required.	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shaction was not required.	areholder action and shareholder
Dated 4-26-2017	
Dated	$\sim$
(By a director, president or other officer – i selected, by an incorporator – if in the hand	
appointed fiduciary by that fiduciary)	soft receiver, reside, or other court
MONZUR H. KHAN	
(Typed or printed name	of person signing)
President/Dir.	
(Title of pers	son signing)