## P16000085136

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_\_\_\_\_TEXAS INSIDER FISHING REPORT INC DOCUMENT NUMBER: P16000085136 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LEYLA SCAPARONE Name of Contact Person JOHN P. MAAS, P.A. Firm/ Company 44 NE 16 STREET Address HOMESTEAD, FLORIDA 33030 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 ) 247-7132
Area Code & Daytime Telephone Number LEYLA SCAPARONE Name of Contact Person 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 enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## TEXAS INSIDER FISHING REPORT INC

TEARS INSIDER FOR INC.		
· · · · · · · · · · · · · · · · · · ·	ly filed with the Florida Dept, of State)	
P16000085136		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following an	nendment(s)
A. If amending name, enter the new name of the corporation:		
	Th	e new
name must be distinguishable and contain the word "corporation," "inc.," or Co.," or the designation "Corp," "Inc," or "Co", 2 "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain th	
B. Enter new principal office address, if applicable:		_₹
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		<u>→</u> < #756 1 중합=
	·	
C. Enter new mailing address, if applicable:		သ
(Mailing address MAY BE A POST OFFICE BOX)		<u>သ</u> လ—
		- •
D. If amending the registered agent and/or registered office addi		
new registered agent and/or the new registered office address	<u>:</u>	
Name of New Registered Agent		
(Florida str	eet address)	
New Registered Office Address:	. Florida	
	(City) (Zip Code.	<del>,                                    </del>
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
r nevery accept the appointment as registered agent. I am jaminar w	чан ана ассері те вонданоня ој те розиюн.	
Signature of New Ra	egistered Agent, if changing	
Check if applicable		
☐ 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)

Example:

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>	<u>John Doe</u>	
X Remove	$\underline{V}$	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	V	COLLIN S. MURPHY	17345 SW 264 TERRACE
X Add		<del></del>	HOMESTEAD, FL 33031
Remove			
2) Change	V	RICHARD C. MURPHY, IV	16385 SW 264 STREET
X Add			HOMESTEAD, FL 33030
Remove Change			
Add			
Remove			<u> </u>
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

.ttaen <i>aaannonai</i>	dding additional Art sheets, if necessary).	(Be specific)				
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	<u></u> _	<del></del> _	<del></del>		<u> </u>	
an amendment	provides for an exc	hange, reclassific	cation, or cance	llation of issue	d shares,	
rovisions for in	nplementing the am	<u>endment if not co</u>	ontained in the	amendment its	<u>elf:</u>	
(if not applic	able, indicate N/A)					
					<u> </u>	
	<del></del>		<del></del>			
						<del></del> .
			<u> </u>			

	) adoption:	, if other than the
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 the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes o	ast for the amendment(s) was/were sufficient for approval	
by	<del></del> .	
• •	(voting group)	
sele	a director, president or other officer – if directors of officers have not beed ted, by an incorporator – if in the hands of a receiver, trustee, or other continued fiduciary by that fiduciary)	
	RICHARD C. MURPHY, III	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	