P17000051514

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	<u>. </u>
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

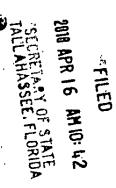
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1092-547-544-



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C. GOLDEN APR 1 9 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:Bay Area	Boat Lift Service and Re	epair inc.
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
. (Carl Smothers		
•		Name of Contact Person	1
•	Tampa Bay Area Boat Lift	Service and Repair inc.	
-		Firm/ Company	
	13908 Basin st		
-		Address	<u> </u>
	Tampa , Fl 33625		
-		City/ State and Zip Code	2
tbabo	atliftservice@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information Carl Smothers	concerning this matter, pleas	e call:at (813	610-9087
Name o	f Contact Person	at (at (de & Daytime Telephone Number
	the following amount made p		•
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indiment Section Identification of Corporations Box 6327 Indianation of Corporations Indianation of Corporations Indianation of Corporation of C	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2018

CARL SMOTHERS 13908 BASIN STREET TAMPA, FL 33625

SUBJECT: TAMPA BAY AREA BOAT LIFT SEVICE AND REPAIR, INC

Ref. Number: P17000051514

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II Letter Number: 418A00006650

RECEIVED

8 APR 16 PH 2: 45

Articles of Amendment Articles of Incorporation

	Articles of Ar to		L. of State
	Articles of Inco	erporation	TO APP 10
TANAD		SEVICE AND REPAIR, IN	IC CANAL OF
· · · · · · · · · · · · · · · · · · ·		filed with the Florida Dep	t of State)
<u>(</u>	P170000515	•	**************************************
		Corporation (if known)	• •
suant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation ad	dopts the following amendment(
If amending name, enter the new nar	me of the corporation:		
mpa Bay Area Boat Lift Service and	Repair inc.		The new
me must be distinguishable and conta orp.," "Inc.," or Co.," or the designa rd "chartered," "professional associati	ition "Corp," "Inc," or "C	Co". A professional corpora	orated" or the abbreviation
		13908 Basin st. Tampa	FI, 33625
Enter new principal office address it	lanniicanio:		
		•	
		,	
incipal office address <u>MUST BE A ST</u>	REET ADDRESS) able:	13908 Basin st. Tampa,	FI 33625
Enter new principal office address, if applications address of the mailing address, if applications address, if applications of the mailing address of the maili	REET ADDRESS) able:	13908 Basin st. Tampa,	FI 33625
incipal office address MUST BE A ST. Enter new mailing address, if applic	REET ADDRESS) able:	13908 Basin st. Tampa,	FI 33625
Enter new mailing address, if applications address MAY BE A POST Of the address of a policing address of address of a policing addre	REET ADDRESS) able: FFICE BOX) for registered office addre		
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Enter new mailing address, if applications of Mailing address MAY BE A POST OF MAILING AND MA	able: FFICE BOX) for registered office address: 13908 Basin st. (Florida street	ess in Florida, enter the nan	

If amending the Officers and/or Director's, 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 <math>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	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change			<u></u>	
Add				
Remove				
4) Change		_		
Add				
Removė				
5) Change		-		
Add				
Remove				
6) Change	 	_		
Add				_
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
Correcting the business name.			
F. 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)			
Correcting the business name.			

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable: March 19, 2018	
(no more than 90 days after	amendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	y 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 number of v by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient f	or approval
by(voting group)	"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shar action was not required.	eholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehol action was not required.	der action and shareholder
Daged March 19, 2018	
Signature C. B.	
(By a director, president or other officer - if direct	
selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	receiver, trustee, or other court
appointed inductary by that inductary)) -
Carl B Dmot	
(Typed or printed name of pers	on signing)
Owner / F	resident
- (The of perion sig	mug)