## P17000093432

(Re	questor's Name)			
(Add	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PłCK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
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I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORA	ATION:	FISH LEVEL COR	P			
DOCUMENT NUMBE	lR:	P17000093432				
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.				
Please return all corresp	ondence concerning this ma	atter to the following:				
		MARIA DIAZ				
	Name of Contact Person					
	MARIA DIAZ CPA					
<del>-</del>	Firm/ Company					
	2250NW 132th Avenue Suite 117					
	Address					
_	Pembroke Pines, Florida, 33028					
	City/ State and Zip Code					
	mdiaz	@mariadiazepa.com				
	E-mail address: (to be u	sed for future annual report	notification)			
For further information of	concerning this matter, plea	se call:				
MARIA DIAZ CPA		at ( <u>954</u>	499-2829			
Name of Contact Person		at (954 ) 499-2829  Area Code & Daytime Telephone Number				
Enclosed is a check for t	he following amount made	payable to the Florida Dept	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section		Amend	Address Iment Section			
Divisi	on of Corporations	Division of Corporations				

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



April 16, 2018

MARIA DIAZ MARIA DIAZ CPA 2250 NW 132TH AVE - STE. 117 PEMBROKE PINES, FL 33028

SUBJECT: FISH LEVEL CORP Ref. Number: P17000093432

We have received your document for FISH LEVEL CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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.

Irene Albritton Regulatory Specialist II

www.sunbiz.org

D O DOM GOOD TO U.S. TO U.S.

Letter Number: 018A00007663



April 4, 2018

SAMY FISCHER 226 WEST 28TH STREET HIALEAH, FL 33010

SUBJECT: FISH LEVEL CORP Ref. Number: P17000093432

We have received your document for FISH LEVEL CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Letter Number: 518A00006784

Irene Albritton Regulatory Specialist II

MECENVED

## Articles of Amendment to Articles of Incorporation of

## FISH LEVEL CORP

1 (311 125	VEL COM
(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000093-	132
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	," "company," or "incorporated" or the abbreviation To". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	三 主义
(Mailing address SIAT BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
Now Danistaned Ament's Cignotone if shanning Designand Agents	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of Nov Re	rgistered Agent, if changing
Signature of New Ac	Smerra rigem, y eminging

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	PT	John Doe	
X Remove	Y	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	VP	JOE FISCHER	3701 N COUNTRY CLUB
X Add	<del></del>		DR UNIT 604
Remove			AVENTURA, FLORIDA 33180
2) Change			
Add			
Remove			·
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessa	Articles, enter cl ירִי). (Be specific	c)			
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f an amendment provides for an provisions for implementing the	exchange, reclas	sitication, or ca	incellation of iss	ued shares.	
(if not applicable, indicate N/.	<u>amenument ii ii</u> A)	n contamed in	the amendment	1131111	
(3)	,				
				<del></del>	
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	,				

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend flicient for approval.	iment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(.	statement s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sha	reholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareho	lder
03/22/2018 Dated	(a)	
(By a c	lirector, procident or other officer—if directors or officers have not incorporator—if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	ot been ner court
/	SAMY FISCHER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	