F188000097837

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | P18000097827 | Inc. | |
|-------------------------|--|--|---|
| DOCUMENT NUM | BER: | | |
| The enclosed Articles | of Amendment and fee are su | abmitted for filing. | |
| Please return all corre | spondence concerning this ma | atter to the following: | |
| | Steven Johnston | | |
| | Sportsman's Card, Inc. | Name of Contact Person | n |
| | 16400 Tortuga St. | Firm/ Company | |
| | Bokeelia, FL 33922 | Address | |
| | | City/ State and Zip Cod | e |
| | suzanne@jugcreek.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further informatio | n concerning this matter, plea | se call: | |
| Suzanne Johnston | | 321 at (| 217-8214 |
| Name | of Contact Person | | de & Daytime Telephone Number |
| inclosed is a check fo | r the following amount made | payable to the Florida Depa | artment of State: |
| □ \$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 Divi P.O. | ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314 | Amend Divisio The Co | Address Iment Section In of Corporations Entre of Tallahassee J. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

| (Document Number of Corporation (if known). LAHASSEE, FL Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame ts Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co'Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." N/A Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) | | | Sportsman's Card, Inc. |
|--|----------------|---|---|
| Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame to Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The The The mane must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co'. Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the "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: (Mailing address MAY BE A POST OFFICE BOX) N/A Name of New Registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) | 38 | ently filed with the Floridal Deptsof Spate) 2: 38 | P18000097827 |
| Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ame to Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The The The mane must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co'. Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the "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: (Mailing address MAY BE A POST OFFICE BOX) N/A Name of New Registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) | JE | er of Corporation (if known) LLAHASSEE, EL | (Document Num |
| The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Co'Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the 'chartered," "professional association," or the abbreviation "P.A." 8. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A O. 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Lip Code) | | · - · · - | |
| The ame must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Co". Inc.," or "Co". A professional corporation name must contain the chartered, "professional association," or the abbreviation "P.A." 3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Lip Code) | | <u>.</u> | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Cor." or Co." or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) | The new | Th | N/A |
| Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A 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 address: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) | ation "Corp.," | ""company," or "incorporated" or the abbreviation "(A professional corporation name must contain the A." | "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation ". |
| O. 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: N/A Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: | | | B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) |
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| (Florida street address) New Registered Office Address: (City) (Zip Code) Sew Registered Agent's Signature, if changing Registered Agent: | | ddress in Florida, enter the name of the ess: | new registered agent and/or the new registered office add N/A |
| New Registered Office Address:, Florida | - | | Nume of New Registered Agent |
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| (City) (Lip Code) lew Registered Agent's Signature, if changing Registered Agent: | | rida. | Now Registered Office Address: |
| ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. | p Code) | | HEN RESISTER Office Address. |
| | ı. | ent: or with and accept the obligations of the position. | lew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fami |
| Signature of New Registered Agent, if changing | _ | v Registered Agent, if changing | Signature of No |
| | | | 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> | John Doe | |
|-------------------------------|--------------|-------------|---------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Pemoue | | | |

| 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) A | E. If amending or adding additional Article (Attach additional sheets, if necessary). | cles, enter change(s (Be specific) | s) here: | | |
|---|---|---------------------------------------|--|-------------------|---------------------------------------|
| 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/4) | | - | | | |
| <u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A) | Please see attached. | | | | |
| <u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A) | | | | | · · · · · · · · · · · · · · · · · · · |
| <u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A) | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | _ | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | |
| <u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A) | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | |
| (if not applicable, indicate N/A) | provisions for implementing the amen | nge, reclassificatio | on, or cancellation ined in the amend | of issued shares, | |
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| The date of each amendment(s) ad | option: | , if other than the |
|---|---|---|
| date this document was signed. Marc | th 8, 2021 | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment fi | ile date) |
| Note: If the date inserted in this bl document's effective date on the Dep | ock does not meet the applicable statutory filing requipartment of State's records. | irements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adoption was not required. | pted by the incorporators, or board of directors without | shareholder action and shareholder |
| ☐ The amendment(s) was/were adop by the shareholders was/were suf- | oted by the shareholders. The number of votes cast for Ticient for approval. | the amendment(s) |
| ☐ The amendment(s) was/were appromust be separately provided for e | roved by the shareholders through voting groups. The jeach voting group entitled to vote separately on the amount | following statement endment(s): |
| "The number of votes cast f | or the amendment(s) was/were sufficient for approval | |
| by | ., | |
| · | (voting group) | |
| | | |
| Dated3 · 15_ | .21 | |
| Signature | | |
| | ector, president or other officer - if directors or officers | c have not been |
| selected. | by an incorporator – if in the hands of a receiver, trust | ce. or other court |
| appointe | d fiduciary by that fiduciary) | |
| | Steven Johnston | |
| | STEVEN JOHN | STUNI |
| | (Typed or printed name of person signing) | |
| I | Preśident | |
| _ | PRESIDENT | |
| | (Title of person signing) | |

| • | Options for | Warrants for Series | Series A | Series B | 7 |
|-----------------|--------------|-------------------------------------|-----------------|-----------------------|-------|
| Name | Common Stock | Common Stock Common Stock Preferred | Preferred Stock | Stock Preferred Stock | lotal |
| Steve Johnston | ٠ | | - | | |
| Mitch Sepaniak | | | | | |
| Thomas Kahl | | | | | |
| Cascade FinTech | | | | • | |

Total Issued and Outstanding Total Authorized

Sportsman's Card Inc. A Florida Company

| | | Common Stock Ledger | Ledger | | |
|---------------|------------------|---|---------------------------|------------------------------|--------------------------------------|
| Certificate # | Number of Shares | Shareholder and Address | Original Date of Issuance | Consideration Paid Per Share | Comments . History / Transfers |
| | | Steve Johnston | - | | |
| 01-400 | 400 | 16498 Tortuga St. Bokeelia, FL 33922 | 11/29/18 | 0 | |
| | | Mitch Sepaniak | | | |
| 401-675 | 275 | 402 South River Farms | 11/67/11 | 0 | |
| | | Alpharetta GA 30022 | | | |
| | | Thomas Khal | | | |
| | | 57 Dolphin Court | | | |
| 676-950 | 275 | Westmoorings by the | 11/29/18 | Þ | |
| | ! | Sea | | c | |
| | | Trinidad | | | |
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951-1000

50 Cascade FinTech PO Box 81888 Las Vegas, NV 89180

TBD

contract) (as per

A [state where company incorporated] Corporation **Stock Options Ledger** [name of company]

Optionee Name and Address

> Exercisable Number of Shares

> > Date of Option

Agreement

Schedule Vesting

Exercise Price

History / Transfers Comments /

A [state where company incorporated] Corporation [name of company]

Warrants Ledger