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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Salt Life Charters I				
DOCUMENT NUMBER:					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	condence concerning this mat	ter to the following:			
	Joshua Long				
-		Name of Contact Persor	<u> </u>		
:	Salt Life Charters INC				
_		Firm/ Company			
	112 N. 12th Street, Apt. 1208				
<del>-</del>		Address			
	Tampa, FL 33602				
-		City/ State and Zip Code	2		
joshjed	ep1@hotmail.com				
	E-mail address; (to be us	sed for future annual report	notification)		
		•	,		
For further information	concerning this matter, pleas	se call:			
Joshua Long		813 at (	610-7847 )		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

#### Articles of Amendment

### Articles of Incorporation



2010 PH 6:13

(Name of Corporation as currently filed with the Florida Dept. of State)				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendm	ent(s) to	
A. If amending name, enter the new name. Salt Luxury Charters INC	ne of the corporation:	Th		
	tion "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P 4"	n	
B. Enter new principal office address, if (Principal office address MUST BE A STI	applicable:	n/a		
(Frincipal office address <u>MOST BE A ST</u>	RELL 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				
new registered agent and/or the new	<del>registered office addres</del> n/a	<u>is:</u>		
Name of New Registered Agent				
-	(Florida si	treet address)		
New Registered Office Address:	1/a	n/a , Florida		
	·	(City) (Zip Code)		
New Registered Office Address:				

## 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: X Change	<u>PT</u>	John Doc	2	
X Remove	<u>v</u>	Mike Jon	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
l)Change		<del></del>		
Add				
Remove				
2) Change				
Add		_		
Remove				
3)Change				· · · · · -
Add				
Remove				
4) Change		_		
Add				
Remove				
Komo e				
5)Change		<del></del>		
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

	ditional Articles, enter char f necessary). (Be specific)	<del></del> -		
				<del></del>
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		<del></del>	<del></del>	
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				-
	s for an exchange, reclassifi-	cation, or cancellation of	Issued shares.	
an amendment provides	ing the amendment if not co	ontained in the amendmen	nt itself:	
an amendment provides				
<u>provisions for implement</u>	icate N/A)			
an amendment provides provisions for implement (if not applicable, indi	icate N/A)			
<u>provisions for implement</u>	icate N/A)			
<u>rovisions for implement</u>	icate N/A)			
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	n/a
The date of each amendment(s) adop	tion:, if other than th
date this document was signed.	
8/28/20	19
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this bloc document's effective date on the Depart	c does not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.
☐ The amendment(s) was/were approvemust be separately provided for each	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
"The number of votes east for	the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder
·	
8/28/19	
	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court
appointed	iduciary by that fiduciary)
	hua Long
	(Typed or printed name of person signing)
	naging Member and majority shareholder
	(Title of person signing)