Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE SEA PETROLEUM INC.

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Corporate Filing Menu

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C. GOLDEN

DEC 1 8 2019

TO: Amendment Section

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

Division of Corporations NAME OF CORPORATION: BLUE PETROLEUM INC. P19000088987 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AL I ALAM Name of Contact Person BLUE SEA PETROLEUM INC Firm/ Company 19900 NW 86 CT Address HIALEAH, FL 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) 300-9778

Area Code & Daytime Telephone Number **ALIALAM** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & **■ \$**35 Filing Fcc Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

Tallahassec, FL 32314

Articles of Amendment to Articles of Incorporation of



2019EE0 17 AHH: 39

LUE SEA PETROLEUM INC.	01		-	7 1 7 113 11 1
(Name of Corporation	as augusanthi	filed with the Flori	da Dant of State)	
(Name of Corporation) 19000088987	as currently	men wan me pion	ua Dept. of State)	
	nt Number of	Corporation (if know		
·		•	•	
ursuant to the provisions of section 607.1006, Florida S s Articles of Incorporation:	Statutes, this F	lorida Profit Corpoi	ration adopts the follow	wing amendment
If amending name, enter the new name of the corp	poration:			
				The new
ome must be distinguishable and contain the word "corp Inc.," or Co.," or the designation "Corp," "Inc," o chartered." "professional association," or the abbrevi	or "Co". A	ompany," or "incorp professional corpo	orated" or the abbrevi ration name must con	ation "Corp.," tain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR	<u>PESS</u>)			
				_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ess in Florida, enter	the name of the	
Name of New Registered Agent				
	(Florida stre	et address)		
New Registered Office Address:			, Florida	
		City)	Œ	(ip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	itered Agent:	City) ith and accept the ol		Tip Code) on.
Signati	ure of New Re	gistered Agent, if ch	anging	_

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a	nd
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	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>D</u>	SURAIYA MUSTAFA	19900 NE 86 CT
Add			HIALEAH, FL 33015
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or additional sh	ing addit eets, if ne	ional Articles, enter change(s) here: cessary). (Be specific)	

		<u></u>
		<u></u> .
F. If an amendment provides for an exchange, r provisions for implementing the amendment (if not applicable, indicate N/A)	eclassification, or cancellation of issued shares, tif not contained in the amendment itself:	
	Page 3 of 4	
		, if other than th
The date of each amendment(s) adoption: date this document was signed.		
Effective date if applicable:		
<u> </u>	no more than 90 days after amendment file date)	

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Dec 17 2019 11:30AM HP Fax

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(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 shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 12/17/2019	
Signature Q	l I aleny
(By a d	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	AL I ALAM
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)