P20000013953

| (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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| F. |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

2661 Executive Center Circle Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: BOAT PARTIE | ES BY THE CHAD INC | 2 | | | |
|--|---|--|--|--|--|--|
| DOCUMENT NUMBI | | P20000013953 | | | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | | | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | | | |
| | | Sonia Becerra | а | | | |
| _ | Name of Contact Person | | | | | |
| | Swyft Filings | | | | | |
| _ | Firm/ Company | | | | | |
| | 3 Greenway Plaza #1320 | | | | | |
| _ | Address | | | | | |
| | Houston, Texas 77046 | | | | | |
| _ | | City/ State and Zip Code | | | | |
| | fil | ings@swyftfilings.c | om | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | | |
| For further information | concerning this matter, pleas | se call: | | | | |
| Sonia Becerra | | at (877 | 777-0450 | | | |
| Name of Contact Person | | Area Coo | de & Daytime Telephone Number | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | ertment 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 | | Amend Divisio | Address ment Section on of Corporations Building | | | |

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation

poration File []

| BOAT PARTIES B | Y THE CROSS FEB - 1 AM 2. 25 | |
|---|--|--|
| (Name of Corporation as current) | y filed with the Florida Dept Sit & tate) | |
| P20000 | 013953 CRETARY OF STATE Corporation (if known) SEE, FL | |
| (Document Number of | Corporation (if known) SEE, FL | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this aits Articles of Incorporation: | Florida Profit Corporation adopts the following amendment(s) | |
| 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 "word "chartered." "professional association," or the abbreviation" | Co". A professional corporation name must contain the | |
| B. Enter new principal office address, if applicable: | 555 NE 15th st.apt. 11G | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | Miami , Florida 33132 | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 555 NE 15th st apt. HG | |
| · · · · · · · · · · · · · · · · · · · | Miami , Florida 33132 | |
| | | |
| D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address | | |
| Name of New Registered Agent | | |
| | | |
| (Florida str | veet address) | |
| New Registered Office Address: | , Florida | |
| | (City) (Zip Code) | |
| | | |
| New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar v | <u>:</u> with and accept the obligations of the position. | |
| | | |
| Signature of New R | Registered Agent, if changing | |

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 | <u>PT</u> <u>J</u> | John Doe | |
|-----------------------------|--------------------|-------------|-------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> § | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) X Change | P | CHAD HARRIS | 555 NE 15th st apt. 11G |
| Add | | | Miami , Florida 33132 |
| Remove | | | |
| 2) X Change | TRE | CHAD HARRIS | 555 NE 15th st apt. 11G |
| Add | | | Miami , Florida 33132 |
| Remove | | | |
| 3.) X Change | SEC | CHAD HARRIS | 555 NE 15th st apt. 11G |
| Add | | | Miami , Florida 33132 |
| Remove | | | |
| 4) X Change | DIR | CHAD HARRIS | 555 NE 15th st apt. HG |
| Add | | | Miami , Florida 33132 |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | cles, enter change(s) h (Be specific) | | | |
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| <u>If an amendment provides for an exch</u> | ange, reclassification | or cancellation of | issued shares, | |
| | administ if not contain | 3.11 111 0.116. 3431116.KERTELIG. | it itseir. | |
| provisions for implementing the ame | ndment if not contain | <u> </u> | | |
| provisions for implementing the ame (if not applicable, indicate N/A) | ndment if not contain | | | |
| provisions for implementing the ame | ndment if not contain | | | |
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|--|---------------------------|
| The date of each amendment(s) adoption: 1/18/2.1 date this document was signed. | , if other than the |
| Effective date if applicable: 1/15/21 (no more than 90 days after amendment file date) | |
| Effective date if applicable: 1/14/21 (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date v document's effective date on the Department of State's records. | vill not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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) | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated | |
| | |
| Signature (By a director, president or other officer – if directors or officers have not been | 7-1 |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court | |
| appointed fiduciary by that fiduciary) | |
| Charl Horris | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |