Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200003845143)))



H200003845143ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	To:			
		Division of Co	rporations	
		Fax Number		
<b>CV</b>	From:			
		Account Name	: FILINGS, INC.	
Ö			: 072720000101	
.~		Phone	: (954)791-2100	
المنا		Fax Number	: (954)583-4117	· · · · · · · · · · · · · · · · · · ·
'-			• •	(23
ī				ed for future
`:	**Enter	the email addres	s for this business entity to be us	ed for future 💳
د دار آزادی	ann	ual report mail:	ings. Enter only one email address p	olease.**
707	Ema	il Address:		· ??

## COR AMND/RESTATE/CORRECT OR O/D RESIGN AQUALIFE DIVERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

	Y SULKER
<del></del>	 NOV 0 0 2020

Electronic Filing Menu

Corporate Filing Menu

Help

H20000384514

## Articles of Amendment to Articles of Incorporation

AQUALIFE DIVERS, INC.			
	<u>e</u> )		
		-	
(Name of Corporation at currently filed with the Florida Dapt. of State)  P20060085343  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc." or Co.," or the designation "Corp." "Inc." or "Co." A professional corporation name must contain the word "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 MATBE A POST OFFICE BOX)  (Florida street address)  Mame of New Registered Agent  (Florida street address)  (Florida street address)  New Registered Office Address:  (City)  Florida  (Tap Code)  Signature of New Registered Agent, if changing  Signature of New Registered Agent, if changing			
A. If amending name, enter the new name of the corporation:			
	TL		
(Name of Corporation as currently filed with the Florida Dept. of State)  (Oocument Number of Corporation (if known)  Into the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to ides of Incorporation:  The new matter the new name of the corporation:  The new "or Co," or the designation "Corp." "Inc." or "Co" A professional corporation name must contain the word "corporation" "company," or "incorporated" or the abbreviation "Corp.  The new "or Co," or the designation "Corp." "Inc." or "Co" A professional corporation name must contain the word ter new principal office address, if applicable:  Iter new mailing address, if applicable:  Iter new Registered agent and/or the new registered office address:  (Florida street address)  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  Florida  Signature of New Registered Agent, if changing  Signature of New Registered Agent, if changing			
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)			
	- 1	F-52	
	;-	( <del>)</del>	• • • •
D. If uppending the registered as A. A.	<del></del>	=	
new registered agent and/or the new registered office address in Florida, enter the name of the	•	ΩJ	: -
Name of New Registered Agent		27	;
(Floridu street address)	<del></del>	رى 	
New Registered Office Address:			
1107104	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the po	sition.		
Signature of New Registered Agent, if changing	<del></del>		
Check If applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.			

## H20000384514

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check Onc)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO, T	Levente Acs	2296 NW 36TH STREET
Add			BOCA RATON, FL 33431
Remove			
2) Change			
Add			
Remove Change	VP	Attila Kutas	2190 SE 5TH STREET APT 7
Add			POMPANO BEACH, FL 33062
X Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Кетюче			

## II20000384514

namendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:  (If not applicable, indicate N/A)	, 5	(Be specific)
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		-
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		,
(if not applicable, indicate N/A)	·	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	·	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	a amondment amond ou for any	
(y not applicable, traicate N/A)	evisions for implementing the amen	inge, reclassification, or cancellation of issued shares,
	(if not applicable, indicate N/A)	Sweet who contained in the amendment (delt:
	//	
	II	

H20000384514

date this document was signed.	, if o	mer than
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be	listed as (
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 sharehol	lder
	should be seen a seen as a see	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
I he number of votes cast to	er the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
November 5, 2	. 2020	
Signature	- Oy	
	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
. Lev	vente Acs	
<del></del>	(Typed or printed name of person signing)	
Chi	ef Executive Officer	
	(Title of person signing)	