## P210000 43437

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Schroeder Fishing (	Guides Inc.		
	IBER: P21000043437			
	s of Amendment and fee are sul	bmitted for filing.		
Please return all corr	espondence concerning this mat	tter to the following:		
	Mary Butler			
		Name of Contact Person		
	Schroeder Fishing Guides Inc	: <b>.</b>		
	<del> </del>	Firm/ Company		
	36205 Chancey Rd			
	Address			
	Zephyrhills, FL 33541			
		City/ State and Zip Code		
	butleremary@gmail.com			
		sed for future annual report	notification)	
For further informat	ion concerning this matter, pleas		786-7391	
Name of Contact Person		Area Coo	786-7391 de & Daytime Telephone Number	
Enclosed is a check	for the following amount made		•	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Amend Divisio The C 2415 ?	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

221000043437	Corporation as curren	tly filed with the Florida Dept. of State)		
	_			
	(Document Number	of Corporation (if known)	<del></del>	
s Articles of Incorporation:	006, Florida Statutes, this	s Florida Profit Corporation adopts the follo	wing amend	ment(s)
a. If amending name, enter the new nam	ne of the corporation:			
√A			The n	iew
ame must be distinguishable and contain the Inc.," or Co.," or the designation "Con Chartered," "professional association," o	rp," "Inc," or "Co".	company," or "incorporated" or the abbrevi A professional corporation name must con	iation "Corp ttain the wi	o" ord
3. Enter new principal office address, if	annlicable:	36205 Chancey Rd		
Principal office address <u>MUST BE A STI</u>	REET ADDRESS )	Zephyrhills, FL	·	_
		33541	21	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	21 JUL 1	_
			₽'n	
			Ge.	- `
			<u>+</u> 	_
<ol> <li>If amending the registered agent and/ new registered agent and/or the new ;</li> </ol>	<u>or registered office add</u> registered office addres	dress in Florida, enter the name of the	_	
	I/A	<del></del>		
3	6205 Chancey Rd			
_	(Fiorida si	reei address)		
New Registered Office Address:	ephyrhills	, Florida_3354	1	
		(City) (Z	Lip Code)	_

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)

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	PT	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	<u>Addres</u> s
l) X Change	P,D	Austin Schroeder	36205 Chancey Rd
Add		-	Zephyrhills, Florida
Remove			33541
2) X Change	V,D	Mary Butler	36205 Chancey Rd
Add			Zephyrhills, Florida
Remove 3) Change			33541
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not coarsined in the amendment itself:  (if not applicable, indicate N/A)	tach addition	dding additional Artic sheets, if necessary).	(Bc specific)			
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06-15-202 }	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
06-15-2021	
Effective date if applicable:	
(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors wi action was not required.	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes caby the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups.  must be separately provided for each voting group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appr	oval
by	"
(voting group)	<del></del> '
· · ·	
Dated x Tuly 10th 2021	
A	
8:	
Signature X	
(By a director, president or other officer - if directors or o	fficers have not been
selected, by an incorporator – if in the hands of a receiver appointed fiduciary by that fiduciary)	trustee, or other court
appointed inductary by that inductary)	
X Austin Schineds (Typed or printed name of person signi	2 Y
V.	b1
x Vresinent	
(Title of person signing)	
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