

P22 0000009411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

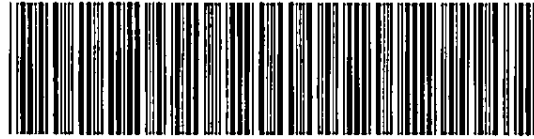
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FILED
2022 MAY 31 PM 4:54
STATE
TALLAHASSEE, FL

cf 6/3/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: High Tide Marine Florida Corp.

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luisa Rivera

Name of Contact Person

Firm/ Company

8007 SW 73rd Ave Apt #9

Address

Miami, FL 33143

City/ State and Zip Code

l.rivera1208@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luisa Rivera

Name of Contact Person

at (786) 281-5495

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 MAY 31 PM 2:00

April 4, 2022

FELIPE GARRIDO
8067 SW 73RD AVENUE
APT #9
MIAMI, FL 33143

SUBJECT: HIGH TIE MARINE CORP
Ref. Number: P22000009411

We have received your document for HIGH TIE MARINE CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form is incomplete.
P21000057336

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P21000057336.

The date of adoption of each amendment must be included in the document. ✓

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s). ✓

The name and title of the person signing the document must be noted beneath or opposite the signature. ✓

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 422A00007801

Articles of Amendment
to
Articles of Incorporation
of

FILED

High Tide Marine, Corp.

(Name of Corporation as currently filed with the Florida Dept. of State) MAY 31 PM 4:54

(Document Number of Corporation (if known))

STATE
TALLAHASSEE, FL

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: "High Tide Marine Florida Corp."
~~High-Tide-Marine, Corp.~~ 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 **MAY BE A POST OFFICE BOX**)

P.O. Box 90004
729 Washington Ave
Homestead, FL 33030

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street 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 with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|---|----------|---------------------|----------------------------|
| 1) ☐ Change | <u>S</u> | <u>Luisa Rivera</u> | <u>111 NW 3rd ST</u> |
| ☒ Add | | | <u>Homestead, FL 33080</u> |
| ☐ Remove | | | |
| 2) ☐ Change | | | |
| ☐ Add | | | |
| ☐ Remove | | | |
| 3) ☐ Change | | | |
| ☐ Add | | | |
| ☐ Remove | | | |
| 4) ☐ Change | | | |
| ☐ Add | | | |
| ☐ Remove | | | |
| 5) ☐ Change | | | |
| ☐ Add | | | |
| ☐ Remove | | | |
| 6) ☐ Change | | | |
| ☐ Add | | | |

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: April 29, 2022 if other than the date this document was signed.

Effective date if applicable: N/A
(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 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 adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

Dated April 29, 2022

Signature Luisa Rivera
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Luisa Rivera
(Typed or printed name of person signing)

Secretary
(Title of person signing)