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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

DOCUMENT NUMBER: P24000028712	NAME OF CORPO	RATION: Florida Surf Hock	ey Inc.				
Please return all correspondence concerning this matter to the following: Jill Ormond, Paralegal Name of Contact Person							
Name of Contact Person			bmitted for filing.				
Name of Contact Person Kaplin Stewart Firm/ Company 910 Harvest Drive Address Blue Bell, PA 19422 City/ State and Zip Code mh@rinelle.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: fill Ormond at (610 941-2583 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$335 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Mailing Address Street Address Street Address	Please return all corre	spondence concerning this ma	tter to the following:				
Firm/ Company 910 Harvest Drive Address Blue Bell, PA 19422 City/ State and Zip Code mh@rincllc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sill Ormond		Jill Ormond, Paralegal					
Firm/ Company 910 Harvest Drive Address Blue Bell, PA 19422 City/ State and Zip Code mh@rinclle.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sill Ormond at (610) 941-2583 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$\frac{1}{2}\$ \$335 Filing Fee & \$\frac{1}{2}\$ \$43.75 Filing Fee & \$\frac{1}{2}\$ \$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Street Address			Name of Contact Person	1			
Address Blue Bell, PA 19422 City/ State and Zip Code mh@rinelle.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sill Ormond at (610 941-2583 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee Certificate of Status Certified Copy (Additional copy is certified Copy (Additional Copy is enclosed) Mailing Address Street Address Street Address		Kaplin Stewart					
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Amendment Section Amendment Section Division of Corporations Division of Corporations		= :					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

2023 APR 22 A/1 9:18

Florida Surf Hockey Inc.	4,	ĺ
(Name of Corporation as currently filed with the Florida Dept. of State)		•
P24000028712		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folloits Articles of Incorporation:	owing amen	dment(s) to
A. If amending name, enter the new name of the corporation:		
Florida Wave Hockey Inc.	The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A."	iation "Cor	p., "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<u> </u> -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
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:		<u>-</u>
Name of New Registered Agent	<u>_</u>	
		
(Florida street address)		
New Registered Office Address:, Florida		<u> </u>
(City) 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 positi	(Zip Code) ion.	
Signature of New Registered Agent, if changing		
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. Example: X Change <u>PT</u> John Doe X Remove <u>v</u> Mike Jones X Add ΣY Sally Smith Type of Action Title Address Name (Check One) 1) ____ Change ____ Add ____ Remove 2) ____ Change ___ Add Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add ____ Remove 6) ____ Change

____ Add

__ Remove

	(Be specific)
	
amendment provides for an excha	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	idment if not contained in the sidenoment fisen.

The date of each amendment(s) adoption date this document was signed.

Effective date if applicable:

the more than 20 days after amendment tile dater

Note: It the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be interest the deciment'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 aniendment(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).

April 22 , 2025

Signature

Dated

(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)

Robert Laferriere

(Typed or printed name of person signing)

Vice President

(Title of person signing)