## P930000 6389

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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Tom Ferland Yachting Services INC, DOCUMENT NUMBER: P93 00000 6389
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tom Ferland
Tom Ferland  Name of Contact Person  Tom Ferland Yachting Services Inc  Firm/ Company  2636 marathen I and  Address  Ft. Lauderdale, F1 33312  City/ State and Zip Code
2636 marathen lane
Ft. Landpidale, F1 33312
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tom Fe1/ad at 954, 309 0911  Name of Contact Person Area Code & Daytime Telephone Number
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:
\$35 Filing Fee
Mailing Address Street Address
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

Tom Ferland Yach ti- (Name of Corporation as currently P9300000 6389	of Services INE.
(Name of Corporation as currently	(fried with the Florida Dept. of State)
P 9 3 0 0 0 0 6 3 8 9	`Corporation (if known)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>i</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp"  professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	A
	<del></del>
	6
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	. /
	N/A
	<del>"</del>
	<u></u>
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address:	<u>.</u>
Name of New Registered Agent W/A	
(Florida str	eet address)
New Registered Office Address: N/A	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar v	the state of the position in the position.
,	• • • • • • •
1.	
N/A	egistered Agent, if changing
Signature of New R	egistered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (11) (11) (11) (12) (11) (12) (13) (14) (15) (15) (17) (17) (17) (17) (17) (17) (17) (17	(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	PT John Doe			
X Remove	<u>V</u> <u>Mike Jones</u>			
<u>X</u> Add	SV Sally Smith			
Type of Action (Check One)	<u>Title</u> <u>Name</u>		<u>Addres</u> s	
Change	I L	paise Tully	7636 Marathon Ft. Lauderdale,	14nc F1 73312
Remove				J 02
2) Change		<u> </u>		
Add				
Remove 3 ) Change				
Add				
Remove		•		
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or ac (Attach additional)	lding additional A sheets, if necessary	rticles, enter ch	nange(s) here:			
NA						
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					<del></del>	·
				<del></del>		
				_		
			·		•	
		-				. —————
				<u> </u>	····	
If an amendment	provides for an e	xchange, reclass	sification, or ca	ncellation of i	ssued shares.	
provisions for in	plementing the a	mendment if no	t contained in t	the amen <u>dmer</u>	it itself:	
(ij not applic	ahle, indicate N/A)					
<u> </u>			• •			
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<del>.</del>			<u>.</u>			
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\*\*.\*

Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	·
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east t	for the amendment(s) was/were sufficient for approval
by	·"
	(voting group)
(By a di	Ann P J-Clad  rector, president or other officer – if directors or officers have not been  by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)  Ton Ferland  (Typed or printed name of person signing)  Director