

P93000032999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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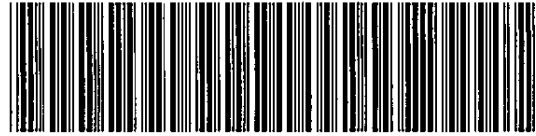
(Business Entity Name)

(Document Number)

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09 JUN 18 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE

JUN 22 2009

EXAMINER

COVER LETTER

TO: Amendment Section •
Division of Corporations

NAME OF CORPORATION: Maritime Professional Training Masters Mates & Eng

DOCUMENT NUMBER: P93000032999

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

Please return all correspondence concerning this matter to the following:

Ronald La Duke

Name of Contact Person

Maritime Professional Training et al

Firm/ Company

1915 S Andrews Ave

Address

Ft. Lauderdale, FL 33316

City/ State and Zip Code

rdukesr@yahoo.com

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

For further information concerning this matter, please call:

Ronald La Duke

Name of Contact Person

at (954)

766-9955

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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Maritime Professional Training Masters, Mates ^{And} Engineers, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P9300003299

(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 **MAY BE A POST OFFICE BOX**)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Ronald La Duke

New Registered Office Address:

1909 SW 1st Avenue

(Florida street address)

Ft. Lauderdale

(City)

, Florida 33315

(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

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>S/D</u>	<u>La Duke, Ronald</u>	<u>1921B South Andrews Ave</u> <u>Ft. Lauderdale, FL 33316</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>V/D</u>	<u>Beavers, Amy Morley</u>	<u>1921B South Andrews Ave</u> <u>Ft. Lauderdale, FL 33316</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove <i>X Changed Title on BOD</i>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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: June 16, 2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ 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

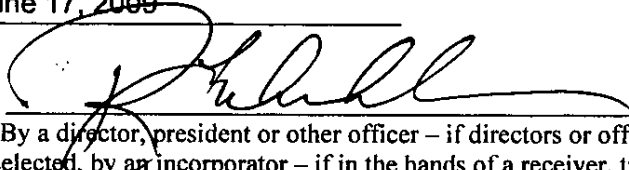
by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated June 17, 2009

Signature


(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)

Ronald La Duke

(Typed or printed name of person signing)

Secretary

(Title of person signing)