

P940000063888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

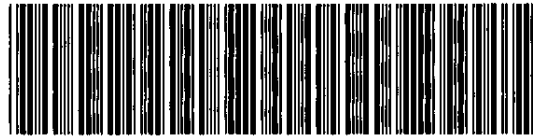
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE  
6/10/09

05/11/09--01051--021 \*\*43.75

FILED  
2009 JUN -8 AM 8:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ADR  
6/9/09

X00789, 00524, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 18, 2009

David Dubuc  
H2O Cafe  
101 S. Fort Lauderdale Bch Blvd, Ste 202  
Fort Lauderdale, FL 33316

SUBJECT: OCEAN BISTRO, INC.  
Ref. Number: P94000063888

We have received your document for OCEAN BISTRO, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction can not be filed to amend an annual report. You may file articles of amendment in order to change the principal, mailing, registered agent and officers addresses. I have enclosed a form that you may fill out and return to us.

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) 245-6907.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 809A00016725

RECEIVED  
2009 JUN -8 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Ocean Bistro Inc

DOCUMENT NUMBER: P94000063888

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

Please return all correspondence concerning this matter to the following:

DAVID DOBUC  
Name of Contact Person

DBA H2O CAFE  
Firm/ Company

101 S. Fort Lauderdale Bch Blvd #202  
Address

FT. Lauderdale, FL 33316  
City/ State and Zip Code

jbaez1950@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID DOBUC at (561) 756-5985  
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:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status<br><u>you have check</u> | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(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

EFFECTIVE  
6/10/09

FILED

2009 JUN -8 AM 8:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ocean Bistro, Inc  
(Name of Corporation as currently filed with the Florida Dept. of State)

P 94000063888

(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)

101 S. FT. Lauderdale Bch Blvd  
Suite 202  
FT Lauderdale, FL 33316

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

101 S. FT Lauderdale Bch Blvd  
Suite 202  
FT. Lauderdale, FL 33316

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:

New Registered Office Address:

(Florida street address)

(City)

\_\_\_\_\_, Florida  
(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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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)*

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**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)*

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The date of each amendment(s) adoption: 6/1/09

Effective date if applicable: 6/10/09  
(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 6/10/09

X Signature Daniel Dubuc  
(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)

Dave Dubuc  
(Typed or printed name of person signing)

OFF. ce - VP  
(Title of person signing)