

P94000074662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

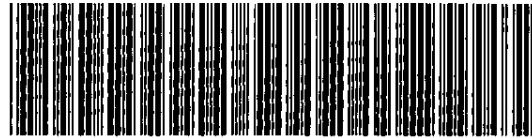
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC -8 AM 9:58

Amend & N.C.
C.COULLETTE

DEC. 10 2010

EXAMINER

LAW OFFICES OF
LEONARD OSHINSKY, P.A.

LAS OLAS CENTRE II - SUITE 970
350 EAST LAS OLAS BOULEVARD
FORT LAUDERDALE, FLORIDA 33301

LEONARD OSHINSKY
ADMITTED IN FLORIDA AND CONNECTICUT

TELEPHONE (954) 527-4100
FACSIMILE (954) 527-7800

December 3, 2010

Division of Corporations
P.O. Box 5627
Tallahassee, FL 32314

Re: Sail On, Inc.
Document No. P94000074662

Dear Sirs:

This office represents Sail On, Inc. an administratively dissolved Florida corporation.

We are seeking to reinstate the corporation. In conversation with your office we were advised that the name of the corporation would have to be amended because of a conflict with an entity filed after the dissolution of this corporation.

Accordingly, we are filing Articles of Amendment to the Articles of Incorporation of Sail On, Inc. which amends its name to "Sail On of Miami, Inc." In addition, we are also filing the Corporation Reinstatement Application and would ask that you file both documents to reflect the corporation's reinstatement and change of name.


Attached is our trust account check in the amount of \$3,052.50 representing the following:

| | |
|--|-----------|
| Reinstatement fee | \$ 600.00 |
| Annual Report fee (1995-2010) | 2,400.00 |
| Filing fee for Articles of Amendment (including Certificate of Status & certified copy) | 52.50 |

Please note that the undersigned is the registered agent of the corporation and we would appreciate all documents and notices being returned to the address noted above.

Thank you for your attention and cooperation. We would also appreciate your calling if there is any question with regard to the documents submitted.

Very truly yours,



LEONARD OSHINSKY

LO:jb
Encl.
jb42707
Certified mail

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sail On, Inc.

DOCUMENT NUMBER: P94000074662

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

Please return all correspondence concerning this matter to the following:

Leonard Oshinsky, Esq.

Name of Contact Person

Leonard Oshinsky, P.A.

Firm/ Company

350 East Las Olas Boulevard, Suite 970

Address

Fort Lauderdale, FL 33301

City/ State and Zip Code

loshinsky@aol.com

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

For further information concerning this matter, please call:

Leonard Oshinsky

Name of Contact Person

at (954)

527-4100

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

Sail On, Inc.

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

P94000074662

(Document Number of Corporation (if known))

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
NO DEC - 8 AM 9:58

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:

Sail On of Miami, Inc.

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:

10101 Collins Ave.

(Principal office address **MUST BE A STREET ADDRESS**)

Apt. 14B

Bal Harbour, FL 33154

C. Enter new mailing address, if applicable:

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

c/o Leonard Oshinsky, P.A.

350 East Las Olas Boulevard, Suite 970
Fort Lauderdale, FL 33301

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:

Leonard Oshinsky

New Registered Office Address:

350 East Las Olas Boulevard, Suite 970

(Florida street address)

Fort Lauderdale

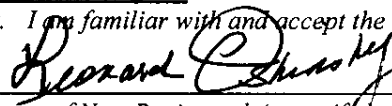
(City)

Florida 33301

(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)

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: November 30, 2010
(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 Nov. 30 - 2010

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)

Elias Landsmanas
(Typed or printed name of person signing)

President
(Title of person signing)