

P99000076023

(Requestor's Name)

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(Address)

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☐ PICK-UP

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(Business Entity Name)

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14 FEB -9 PM 12:12
2014

12/10/14

ARM
11-10-14

LAW OFFICE OF ANDREW W. ROSIN, P.A.

1966 Hillview Street
Sarasota, FL 34239

Telephone (941) 359-2604
Facsimile: (941) 366-1252
arosin@rosinlawfirm.com

December 3, 2014

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: K. R. D., Inc. – P97000095802
Fishing Harbor, Inc. – P00000005608
Hookum Harbor, Inc. – P99000076023

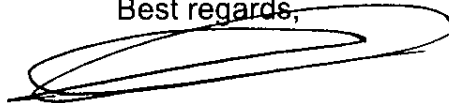
Dear Sirs:

Enclosed please find the following in connection with the above matters:

1. Articles of Amendment to Articles of Incorporation for K. R. D., Inc.
2. Articles of Amendment to Articles of Incorporation for Fishing Harbor, Inc.
3. Articles of Amendment to Articles of Incorporation for Hookum Harbor, Inc.

Your office is in receipt of the filing fee of \$105.00. Our office previously submitted Articles of Amendment with the payment, but we failed to use the correct form.

Best regards,



Andrew W. Rosin

Enclosure

RECEIVED
14 DEC -9 AM 7:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
14 DEC -9 PM 12:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Hookum Harbor, Inc.

DOCUMENT NUMBER: P99000076023

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

Please return all correspondence concerning this matter to the following:

Andrew W. Rosin

Name of Contact Person

Law Office of Andrew W. Rosin

Firm/ Company

1966 Hillview Street

Address

Sarasota, Florida 34239

City/ State and Zip Code

arosin@rosinlawfirm.com

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

For further information concerning this matter, please call:

Andrew W. Rosin

941

359-2604

at ()

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

☐ \$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

RECEIVED

14 DEC -9 AM 7:42

Division of Corporations
Tallahassee, FL

RECEIVED
14 DEC -9 AM 11:12
Division of Corporations
Tallahassee, FL

Articles of Amendment
to
Articles of Incorporation
of

HOOKUM HARBOR, INC.

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

P99000076023

(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)

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

(Florida street address)

New Registered Office 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)

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP, T&D</u>	<u>Calvin W. Erb</u>	<u>2015 S. Tuttle Ave.</u> <u>Suite B</u> <u>Sarasota, Fl 34239</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Kenneth R. Davis</u>	<u>3634 Webber Street</u> <u>Sarasota, FL 34234</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>William C. Davis</u>	<u>5050 N. Tamiami Trail</u> <u>Sarasota, Fl 34234</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

(Attach additional sheets, if necessary). (Be specific)

10

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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.

November 26, 2014

Dated _____

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)

Calvin W. Erb

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
14 DEC -9 PM 1:12
TAM



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2014

ANDREW W. ROSIN, ESQ.
LAW OFFICE OF ANDREW W. ROSIN
1966 HILLVIEW STREET
SARASOTA, FL 34239

SUBJECT: HOOKUM HARBOR INC.
Ref. Number: P99000076023

We have received your document and check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorrect form was submitted. Please complete form pursuant to Florida Profit Corporation, section 607.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 614A00023979

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11 DEC -9 11:12
REC