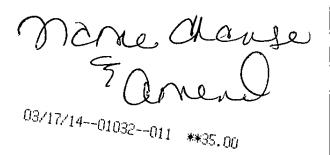
528712

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BR 3/14

COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: Innovation BER: S28712	Offshore Marine	e, Inc.		
The enclosed Article.	s of Amendment and fee are su	ibmitted for filing.			
Please return all corre	espondence concerning this ma	atter to the following:			
	Joyce La More				
		Name of Contact Perso	n		
	Huber Marine and Machine Corp.				
		Firm/ Company			
	8027 15th Street	East			
		Address			
	Sarasota, Florida	34243			
		City/ State and Zip Cod	e		
me	jrae@aol.com				
		sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas				
Brenden S. Moriarty, Esq.		_{n1} 941	749-0075 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a che ck fo	or the following amount made	payable to the Florida Depa	nriment of State:		
S35 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 A	Amendment	
t)	-	
Articles of Ir o	f FILED	
Innovation Offs	hore Marine, Inc. ph 1: 13	
(Name of Corporation as currently filed with the	Florida Dent of State	
S28	712 STATE STATE	
(Document Number of Corporation		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
Huber Marine and Machine Corp.	The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
,	Sarasota, Florida	
	34243	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		
Name of New Registered Agent NA	<u></u>	
(Florida st	roet address)	

New Registered Agent's Signature, if changing Registered Agent:
Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

New Registered Office Address:

Signature of New Registered Agent, if changing

(City)

Florida

(Zip Code)

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 tisted 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: \(\Sigma \Change\)	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
() Change				
Add Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)	
A		
· · · · · · · · · · · · · · · · · · ·		
		-
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
A		
<u>, ,</u>	***************************************	
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption:	, if other than the
•	
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 February 20, 2014	
Signature James Xa Mne	
(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)	
Joyce La More	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_