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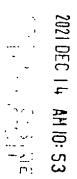
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C. BRUMBLEY
JAN - 5 2022

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Intrepid Southeast, Inc. DOCUMENT NUMBER: S89019 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Amy E. Shranko Name of Contact Person Intrepid Southeast, Inc. Firm/ Company 11700 Belcher Road S Address Largo, FL 33773 City/ State and Zip Code AShranko@IntrepidPowerboats.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Amy E. Shranko Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Intrepid Southeast, Inc.	
(Name of Corporation as current)	y filed with the Florida Dept. of State)
\$89019	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
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)	7021 DEC
D. If amending the registered agent and/or registered office address Name of New Registered Agent	
New Registered Office Address:	eg adiress)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	: with and accept the obligations of the position. egistered Agent, if changing

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:	e. ame san	iy Smun, S) as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	VP	Michael Obolsky	11700 Belcher Road S
Add			Largo, FI 33773
X Remove			
2) Change	Secreta	James David Gillikin	11700 Belcher Road S
Add	•		Largo, F1, 33773
X Remove 3) Change	Sect/Tr	re Michael H. McLamb	2600 McCormick Drive, Suite 200
$\frac{X}{X}$ Add	· · · ·		Clearwater, FL 33759
Remove			
4) Change	Asst Ti	re Anthony Cassella	2600 McCormick Drive, Suite 200
$\frac{X}{X}$ Add			Clearwater, FL 33759
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

<u>1 ameno</u> Attach <i>a</i>	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary). (Be specific)
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f an an	ndment provides for an exchange, reclassification, or cancellation of issued shares,
provisi	is for implementing the amendment if not contained in the amendment itself:
(ij	a applicable, indicate N/A)
	_
	/ ///
	// \

	11/01/2021
The date of each amendment(s) date this document was signed.	adoption:, if other than t
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as to Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	<u>.</u> "
-	(voting group)
Dated//_ Signature	11/21 Inst
(By d	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Amy E. Shranko
	(Typed or printed name of person signing)
	VP-Finance
	(Title of person signing)