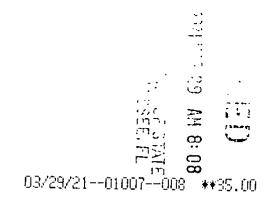
## V41806

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: American Custom	n Yachts, Inc.	
DOCUMENT NUMBER: V41806		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Derek Larsen-Chaney, Esq.		
	Name of Contact Person	- <del></del>
Phelps Dunbar LLP		
	Firm/ Company	<del></del>
100 South Ashley Drive, Su	ite 2000	
	Address	
Tampa, Florida 33602		
	City/ State and Zip Cod	
chaneyd@phelps.com		
E-mail address: (to be u	ised for future annual report	notification)
For further information concerning this matter, pleat Derek Larsen-Chaney, Esq.	ase call: at ( 813)	<b>, 222-7677</b>
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□ \$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	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

THE THE CONTRACT OF THE CONTRA

## Articles of Amendment to Articles of Incorporation of

of
American Custom Yachts, Inc.

(Name	of Corporation as currently f	iled with the Florida Dep	t. of State)		
V41806					
	(Document Number of C	orporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flo	rida Profit Corporation ad	dopts the following	z amendm	nent(s) to
A. If amending name, enter the new n.	ame of the corporation:			T!	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association."	Corp," "Inc," or "Co". A pr	pany." or "incorporated" ofessional corporation no	or the abbreviation must contain	_The ne on "Corp., on the wor	•
B. Enter new principal office address, (Principal office address MUST BE A S					
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)  D. If amending the registered agent an	<u>OFFICE BOX</u> ) -	i. Flacida and the		-20	
new registered agent and/or the nev		in Provida, enter the Nat		·)	
Name of New Registered Agent	C T Corporation Syste	em	<u> </u>		نسيا
	1200 South Pine Island Road		رت الآل وي. ماسيا التراث	89	
New Registered Office Address:	(Florida street	oddress)	, Florida 33324	80	
	(Ci	(y)	(Zip C	ode)	
	ered agent. I am familiar with Corporation System araus Pytakus	and accept the obligation	s of the position.		
Check if applicable  The amendment(s) is/are being filed to	urrusht to c 607 0130 (11) (-)	r.c			

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
I) X Change	PD	Dino Chouest	16201 East Main Street
Add			Cut Off, Louisiana 70345
Remove			
2) X Change	VSAR	Dionne Chouest Austin	16201 East Main Street
Add			Cut Off, Louisiana 70345
Remove 3) Change	ui.		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	——————————————————————————————————————
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	indment if not contained in the amendment itself:
(ly not applicable, indicate WA)	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
date tills document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this bedocument's effective date on the De	slock does not meet the applicable statutory filing to partment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast officient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. 7 each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	val
by	(voting group)	
	(voting group)	
selecte	irector, president or other officer – if directors or officer diduction by that fiduciary)	
	Oine Chanest (Typed or printed name of person signing	
	(Typed or printed name of person signing	
	President	
	(Title of person signing)	