733672

(Re	equestor's Name))
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	ne #)
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2010 FEB 26 PH 1:32 SECRETARY OF STATE FALLAHASSEE, FLORIDA

Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PARADISE	GARDENS SECTI	ION FOUR MAINE
DOCUMENT NUM	BER: <u>733672</u>		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	SHELLEY LAND	VG	
-	(Name of	Contact Person)	
_ -	C4 MAINTENA		
	(Firm	n/ Company)	
	1700 MARGAT		
	(,	Address)	
	MARGATE FL.	3 306 3	· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to be use	net d for future annual report notif	fication)
For further information	on concerning this matter, pleas	e call:	
SHELLEY (Name	Of Contact Person)	at (954) 93 (Area Code & Day	3 -26/4 vtime Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departm	ent 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)
Amen Divisi P.O. I	ng Address idment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cer	n stions nter Circle

Articles of Amendment to Articles of Incorporation

_	of	
PARADISE GARDENS S	SECTION FOUR MAINTENA.	NCE CORPORATION, INC.
	ntly filed with the Florida Dept. of S	tate)
733672		
	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Inc		Profit Corporation adopts
A. If amending name, enter the new name of	the corporation:	
The new name must be distinguishable and cor abbreviation "Corp." or "Inc." "Company" or		corporated" or the
B. Enter new principal office address, if appli	cable:	
(Principal office address <u>MUST BE A STREET</u>	' <u>ADDRESS</u> ')	20
		1
		2 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	F POV	SSE
(Matthe A POST OFFIC	<u>L BVA</u>)	70 7
		ラー ラー · · · · · · · · · · · · · · · · ·
		50 P
D. If amending the registered agent and/or re		nter the name of the
new registered agent and/or the new regist	ered office address:	
Name of New Registered Agent:		
_		
New Registered Office Address:	(Florida street address)	
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.	r Registered Agent: agent. I am familiar with and acco	ept the obligations of the
		
Six	enature of New Registered Agent, if ch	anging

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>	Name	Address	Type of Action
DES	CAPAZZO, LEE	1115 NW 74th Ave MARGATE, FL 33063	□ Add □ Remove
<u>OMPTR</u> ALER	KWAAK, ROBERT	725 NW TERRACE MARGATE, FL 33063	Add Remove
			☐ Add ☐ Remove
	or adding additional Articles, enter chional sheets, if necessary). (Be specific,		
<u></u>			

The date of each amendment(s) a	doption: 02-24-10
	(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 adwas/were sufficient for approval	lopted by the members and the number of votes cast for the amendment(s) l.
There are no members or members adopted by the board of director	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
have no	chairman or sice chairman of the board, president or other officer-if directors to been selected, by an incorporator — if in the hands of a receiver, trustee, or our tappointed fiduciary by that fiduciary) MARY
	resident Maint Board of Dir (Title of person signing)

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