# H66458

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TO: Amendment Section Division of Corpora				6 7 20 9 5
NAME OF CORPORA	ATION:	LAKES OF TAMPA, INC		3
DOCUMENT NUMBE	ER:	H66458		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this mat	tter to the following:		
	DEDDICK WICE			
	DERRICK WISE	1. J.		
	WHOE ACCOURTS A	Name of Contact Person		
_	WISE ACCOUNTING &			
		Firm/ Company		
	712 N MAIN ST			
		Address		
	CHIEFLAND FL 32626			
		City/ State and Zip Code		
	E-mail address: (to be us	sed for future annual report	notification)	
		,		
For further information	concerning this matter, pleas	se call:		
DERRICK WISE		at ( 352		
Name of	Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)	
Maili	ng Address	Street 2	<u>Address</u>	
Amen	idment Section	Amend	ment Section	
	ion of Corporations Box 6327		n of Corporations Building	
	nassee, FL 32314	2661 E	xecutive Center Circle	
		Tallaha	ssee, FL 32301	

### Articles of Amendment to Articles of Incorporation

#### LAKES OF TAMPA, INC.

## 6 (Name of Corporation as currently filed with the Florida Dept. of State) H66458 (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: 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 of fice address: Name of New Registered Agent 951 NE 165TH ST (Florida street address) **FANNING SPRINGS** New Registered Office Address (City) 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: 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	DVP	JOHNNY LAKE	951 NE 165TH ST
Add			FANNING SPRINGS FL 32693
Remove			
2) X Change	DP	LUCY J. LAKE	951 NE 165TH ST
Add			FANNING SPRINGS FL 32693
Remove	ST	FANNIE O YOUDAL	14919 DOUGLAS ST
3) Change		TANNEO TOUDAL	
X Add			DADE CITY FL 33525
Remove			
4) Change	<del>.</del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an exc provisions for implementing the am	nange, reclassificat endment if not con	tained in the amen	n of issued snares dment itself:	5.
(if not applicable, indicate N/A)				
	· · · · · · · · · · · · · · · · · · ·			
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The date of each amendment(s) adoption:	Aug 11,2016	if other than the
date this document was signed.	Aug 11,2016 Aug 11,2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this of State's records.	date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the amendment approval.	nt(s)
	the shareholders through voting groups. The following state ng group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the am	nendment(s) was/were sufficient for approval	
by	oting group)	
(r	oting group)	
The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and shareho	older
The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and shareholder	
Dated 8/11/16		
Signature	The	
selected, by an in	resident or other officer – if directors or officers have not be accorporator – if in the hands of a receiver, trustee, or other carry by that fiduciary)	
	JOHNNY LAKE	
	(Typed or printed name of person signing)	
	DIRECTOR/VICE PRESIDENT	
	(Title of person signing)	