# K33302

(Requestor's Name)
(Address)
(Address)
(0) 10) 17: 10
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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N/C 1Brown 11-2-11

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: Pools	'N Spas of Cen	tral Florida, IN
DOCUMENT NU	JMBER:	302	<u>.</u>
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
	James	Eden	
	N	ame of Contact Person	
	Pools in Spas	of Central Fo	lorida, Inu
	50 Audubon	Las	
		Address	
		ity/ State and Zip Code  hotma: 1. Com d for future annual report notification)	
	ation concerning this matter,		
Jam	es Eden	at (386 ) 527 - 1	1795
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depart	ment 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	P.
i alialiasse	6, I D J2J1T	Tallahassee, FL 32301	•



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 21, 2011

JAMES EDEN
POOLS 'N SPAS OF CENTRAL FLORIDA, INC.
50 AUDUBON LANE
FLAGLER BEACH, FL 32136

SUBJECT: POOLS 'N SPAS OF CENTRAL FLORIDA, INC.

Ref. Number: K33302

We have received your document for POOLS 'N SPAS OF CENTRAL FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption is the date the amedment was approved. Please correct your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 111A00024140

Teresa Brown Regulatory Specialist II

www.sunbiz.org

#### **Articles of Amendment**

to

### **Articles of Incorporation**

of

	the Florida Dept. of State
K33302	7455A
(Document Number of Corporate	tion (if known)
suant to the provisions of section 607.1006, Florida Statu	ntes this Florida Profit Cornoration adonts th
endment(s) to its Articles of Incorporation:	nes, uns riorau rroja corporation adopts in
70 N	
If amending name, enter the new name of the corporation	
Strong, Inc. me must be distinguishable and contain the word "corp	The
me must be distinguishable and contain the word "corp breviation "Corp.," "Inc.," or Co.," or the designation "C	poration," "company," or "incorporated" o. Corp," "Inc," or "Co". A professional corpor
me must contain the word "chartered," "professional associ	
Enter new principal office address, if applicable:	50 Audubon LN
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	50 Audubon LN Flagler Bch Fl 32136
	Flagier ACh FC
	35/36
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Sc. M. a.
	Same
	Same
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office	e address in Florida, enter the name of the
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	e address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office	e address in Florida, enter the name of the
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:	e address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:	e address in Florida, enter the name of the dress:
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:  New Registered Office Address: (Flori	e address in Florida, enter the name of the dress:  rida street address) , Florida
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:	e address in Florida, enter the name of the dress:  rida street address) , Florida
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:  New Registered Office Address: (Flore (City))  We Registered Agent's Signature, if changing Registered Agent.	e address in Florida, enter the name of the ldress:  rida street address) , Florida
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad  Name of New Registered Agent:  New Registered Office Address: (Flori	e address in Florida, enter the name of the ldress:  rida street address) , Florida

## It amending the Utticers 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
		· · ·		Add Remove
•				Add Remove
				Add Remove
		or adding additional Articles, enter chional sheets, if necessary). (Be specific,		
prov	<u>isions</u>	dment provides for an exchange, reclass for implementing the amendment if no applicable, indicate N/A)		
<del> </del>				

the date of each amendment	(s) adoption:	10/18/11	
1 4 5 C W	(date o	of adoption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days a)	ifter amendment file date)	
Adoption of Amendment(s)	(CHECK O	NE)	
The amendment(s) was/wer by the shareholders was/we		olders. The number of votes cast for the amendment.	(s)
		nolders through voting groups. The following staten ntitled to vote separately on the amendment(s):	ıent
"The number of votes	cast for the amendment(s)	) was/were sufficient for approval	
by	_	,,	
•,	(voting group)	<del></del> -	
action was not required.  The amendment(s) was/wer action was not required.	re adopted by the incorpor	rators without shareholder action and shareholder	
Dated	118/11 Xc SI		
(By sele	a director, president or other	ther officer – if directors or officers have not been - if in the hands of a receiver, trustee, or other court	
	James E	rinted name of person signing)	
	(Typed or pr	rinted name of person signing)	
	Preside	ent	
	(Title of person s	signing)	