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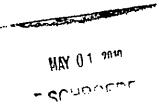
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	GOLDEN	FLAMING	O APAR	TMEUT	OWNERS !
DOCUMENT NUMBER:	N18	0000053	3)]		
The enclosed Articles of Amenda	nent and fee are subm	itted for filing.			
Please return all correspondence of	concerning this matter	to the following:			
		Name of Contact Pers			
GOLDEN FLAMI			•	S IN	<u>C·</u>
416 73 no	AVE	NORTH			
ST. PETER					<u>.</u>
ron, rit		City/ State and Zip Co			
For further information concerning					
RONALD QI	T CHIE e of Contact Person)	at	$\frac{(727)}{\text{Area Code}}$	692 aytime Teleph	. 7328
Enclosed is a check for the follow	ing amount made pay	able to the Florida Dep	partment of State	:	
\$35 Filing Fee \$\simeg\$ C	43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Fil Certificate Certified ((Additiona Enclosed)	of Status Copy I Copy is	
Mailing Addre Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ction porations	Amer Divis Clifto 2661	t Address adment Section ion of Corporatio in Building Executive Cente hassee, FL 3230	r Circle	

Articles of Amendment to Articles of Incorporation

GOLDEN FLAMINGO APARTMENT OWNERS INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N | 800000 53 | | (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For 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" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 416 73 P AVE C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PETERSBURG FI 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 office address: Name of New Registered Agent: (Florida street address) 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, at 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.

Mike Jones, V as Re.	emove, and Sally Smith, SV as an Add.	
Example: X Change X Remove X Add	PT John Doe V Mike Jones SV Sally Smith	FIL. 19 APR 22 SLUKETARY KILLARASSER
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
Change Add Remove	President Chris MANDELKA	<u>≅</u> ≒ ω
2) Add	SEER. KIM LAWSON NEW TITLE, OFICER	41673 Petersburg FL
Remove 3) Change Add	TRESURE STANLEY BELL	33702 41673 Pave NV # 10", St Petersburg FL.
Remove 4) Change Add	SECR. JEAN SWEET	33702 416 73 ROANCIN # 10 St. Petersburg FL
Remove 5) Change Add	OFFICER MAURICE BRANCATO	33702 71673 PAUCN #11 5+ Petersburg Fl 33702
6) Change Add Remove	SECRETARY RONALD RITCHIE	416 73" Aven #10 St Retersburg FC 33702

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

•	7(+Le	NAME		Apress	
7)	ADD, PRESIDEM	Stephen	BLAIR	416 1300 AUCW	
	/			St Petersburg	-
3)	ADD TRESURE	AZRA	CLLJO	4167350 A 10N	
3				Stretersburg F	
9)	ADD OFFICER	FATOS	SULAT	416 73 10 AVE N	
				st Petersburg	•
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	e date of each amendment(s) adoption:4 · e this document was signed.	20-19			_, if other than the
effe	ective date <u>if applicable</u> :				
	(no more t	han 90 days after	r amendment file date)		
	e: If the date inserted in this block does not meet ument's effective date on the Department of State		atutory filing requirements.	, this date will not b	e listed as the
١d٥	option of Amendment(s) (CHECK	ONE)			
	The amendment(s) was/were adopted by the mer was/were sufficient for approval.	nbers and the nur	nber of votes east for the a	mendment(s)	
	There are no members or members entitled to vo adopted by the board of directors.	te on the amendr	ment(s). The amendment(s) was/were	
	Dated 4.20.19 Signature Pr Ro		_		
	Signature	man of the board incorporator ~ it	f in the hands of a receiver,		-
	Romi	ALD RI	tchie		
	Т (Т	yped or printed r	name of person signing)		19 Pg 7
	5	ecret,	ARY f person signing)	Y CK	FIL APR 22
		(Title o	f person signing)	E. FLORIDA	