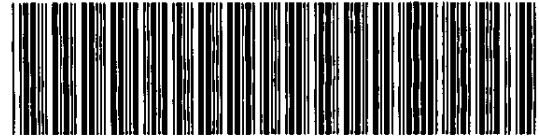


PO8000107073



400290087744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
STATE OF ARIZONA

OCT - 7 2016

C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 23, 2016

JEFFREY B. SMITH / JEFFREY B. SMITH PA
1401 E. BROWARD BLVD SUITE 300
FORT LAUDERDALE, FL 33301 US

SUBJECT: 1760 LANGLEY AVE. CORPORATION
Ref. Number: P08000107073

We have received your document for 1760 LANGLEY AVE. CORPORATION 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 document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 016A00020519

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 1760 LANGLEY AVE. CORPORATION

DOCUMENT NUMBER: P08000107073

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JEFFREY B. SMITH, P.A.
Name of Contact Person
JEFFREY B. SMITH, ESQUIRE
Firm/ Company
1401 E. BROWARD BLVD., SUITE 300
Address
FORT LAUDERDALE, FLORIDA 33301
City/ State and Zip Code

JSMITH@SMITHATLAW.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFFREY B, SMITH at (954) 467-3000
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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1760 LANGLEY AVE. CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000107073

(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:

The new 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**)

752 BLANDING BLVD.

SUITE 104

ORANGE PARK, FLORIDA 32065

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

752 BLANDING BLVD.

SUITE 104

ORANGE PARK, FLORIDA 32065

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 GLENN R. MEE

752 BLANDING BLVD., SUITE 104

(Florida street address)

New Registered Office Address: ORANGE PARK, Florida 32065
(City) (Zip Code)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>P</u>	<u>DAVID P. HILL</u>	<u>1801 S. VOLUSIA AVENUE</u>
<input type="checkbox"/> Add			<u>ORANGE CITY, FL 32763</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP</u>	<u>STEVE GABRILOVE</u>	<u>2431 NORTHEAST 32ND COURT</u>
<input type="checkbox"/> Add			<u>LIGHTHOUSE POINT, FL 33064</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>ST</u>	<u>MICHAEL BECKMAN</u>	<u>1801 S. VOLUSIA AVENUE</u>
<input type="checkbox"/> Add			<u>ORANGE CITY, FL 32763</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>P</u>	<u>GLENN MEE</u>	<u>752 BLANDING BLVD.</u>
<input checked="" type="checkbox"/> Add			<u>SUITE 104</u>
<input type="checkbox"/> Remove			<u>ORANGE PARK, FL 32965</u>
5) <input type="checkbox"/> Change	<u>ST</u>	<u>STEPHEN GABRILOVE</u>	<u>4 MOSS POINT DRIVE</u>
<input checked="" type="checkbox"/> Add			<u>ORMOND BEACH, FL 32174</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: _____
date this document was signed.

August 16, 2016

if other than the
date this document was signed.

Effective date if applicable: _____

(no more than 90 days after amendment file date)

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 8/16/16

Signature _____

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

GLENN MEE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)