## P100055046

| questor's Name)   |   |
|-------------------|---|
| dress)            |   |
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| //State/Zip/Phon  | e #)  |
| ☐ WAIT            | MAIL  |
| siness Entity Nar | me)   |
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| Certificates      | s of Status   |
| Filing Officer:   |   |
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Office Use Only

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Model Control

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

| The enclosed Articles of Amendment and Please return all correspondence concerning             | fee are submitted for filing.  |
|--|--|
| Please return all correspondence concernin   | Maghen Wells Name of Contact Person  hinsula Properties Realty, Inc. Firm/ Company  205 3rd Street South                         |
|  | Maghen Wells Name of Contact Person  ninsula Properties Realty, Inc. Firm/ Company  205 3rd Street South                         |
| Per  | Name of Contact Person  ninsula Properties Realty, Inc.  Firm/ Company  205 3rd Street South                                     |
| Per  | ninsula Properties Realty, Inc. Firm/ Company  205 3rd Street South  |
| Per  | Firm/ Company  205 3rd Street South  |
|  | 205 3rd Street South   |
|  |  |
|  | Address  |
|  |  |
| Ja   | acksonville Beach, FL 32250  |
| <del></del>  | City/ State and Zip Code   |
| E-mail address: (to  | maghen@live.com be used for future annual report notification)   |
| For further information concerning this m  | atter please call  |
| •  | •  |
| Name of Contact Person   | at ( 904 ) 545-5533  Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amo  | ount made payable to the Florida Department of State:  |
| <b> </b>   | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  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**

| <del></del>   |  |  |
|---|--|--|
| Articles of Anto to Articles of Inco of Peninsula Properties Res (Name of Corporation as currently filed with the P10000055046 (Document Number of Corporation)   | orporation<br>alty, Inc.<br>he Florida Dept. of State)   | ALESTE AN 9:53                         |
| Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:   | es, this <i>Florida Profit Corporat</i>  | ion adopts the following               |
| A. If amending name, enter the new name of the corporation  | <u>ı:</u>  |  |
| name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Con name must contain the word "chartered," "professional association of the contain the word "chartered," | orp," "Inc," or "Co". A profes<br>ation," or the abbreviation "P.A.  | sional corporation                     |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | 205 3rd Street South  Jacksonville Beach, FL 32  | <u></u><br><u>2</u> 50                 |
| C Enter new mailing address if annicable  | estate and the second s | ************************************** |

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: |  |
|-------------------------------|--|
|                               |  |

205 3rd Street South

New Registered Office Address: (Florida street address)

> Jacksonville Beach , Florida 32250 (Zip Code) (City)

205 3rd Street South

Jacksonville Beach, FL 32250

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

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)

| <u>Title</u> | <u>Name</u>   | Address  | Type of Action    |
|--------------|---|--|-------------------|
| VP           | John C. Wells   | 3625 Millcrest Drive<br>Jacksonville, FL 32277 | ☑ Add<br>□ Remove |
|              |   |  | ☐ Add<br>☐ Remove |
|              |   |  | ☐ Add<br>☐ Remove |
|              | g or adding additional Articles, enter c  |  |                   |
| provisions   | ndment provides for an exchange, recla<br>for implementing the amendment if no<br>applicable, indicate N/A) |  |                   |
|              | <del></del>   |  |                   |
|              |   |  |                   |
|              |   | <u>,                                    </u>   |                   |

| The date of each amendmen                        | t(s) adoption: August 13, 2010  |
|--|---|
| Effective date <u>if applicable</u> :            | August 13, 2010 (date of adoption is required)  |
|  | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                         | (CHECK ONE)   |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|  | ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder   |
| Dated_8/13                                       | 3/2010  |
| Signature _                                      | Maghen Well?  |
|  | a director, president or other officer - if directors or officers have not been   |
|  | ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)                                   |
|  |   |
|  | Maghen Wells  |
|  | (Typed or printed name of person signing)   |
|  | President President   |
|  | (Title of person signing)   |