

## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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Division of Corporations

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Account Number : 119990000255 Phone : (561)844-3700 Fax Number : (561)844-2388

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LAKEVIEW SERVICE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

## Articles of Amendment Articles of Incorporation

LAKEVIEW SERVICE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 264557 (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." 127 EAGLETON CT B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) PALM BEACH GARDENS, FL 33418 C. Enter new mailing address, if applicable: 127 EAGLETON CT (Mailing address MAY BE A POST OFFICE BOX) PALM BEACH GARDENS, FL 33418 D. If amending the registered agent and/or registered office address in Florida, anter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent SUSAN J. ATHERLEY 127 EAGLETON CT (Florida street address) PALM BEACH GARDENS New Registered Office Address: 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.

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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 = Trustes; 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.

X Change	<u>PT</u>	John Doe				
X Remove	$\underline{\mathbf{v}}$	Mike Iones				
_X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	Address			
l) Change	PD	NOEL B. ATHERLEY, SR.	240 CANTERBURY DR EAST			
Add			PALM BEACH GARDENS			
X Remove			FL 33418			
2) Change	PD	SUSAN J. ATHERLEY	127 EAGLETON CT			
X Add			PALM BEACH GARDENS			
Remove			FL 33418			
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
<b>.</b>						
6)Change						
Add						
Remove						

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ttach additional sh	ing additional Articles eets, if necessary). (i	Be specific)			
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<u>i an amendment p</u>	provides for an exchar	nge, reclassificati	on, or cancellat	ion of issued shar	·es.
Gif not applied	ble, indicate N/A)	iment it not come	alifed to the anti-	and the state	
(у пог арриса	01 <b>c</b> , 1/1111coto 11111)				

The date of each amendment(s)	idoption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	rill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement ir each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
har	,"	
Бу	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated Signature =	SILL (A)	
(By a selec	director, president or other officer - if directors or officers have not been ted, by an interporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Shelly Atherley	
	(Typed or printed name of person signing)	
	Secretary, Director	
	(Title of person signing)	_