# 612789

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(/\u	uress)	
(Cit	y/State/Zip/Phone	e #)
_		_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(2-		,
(7)		
(100	cument Number)	
Certified Copies	_ Certificates	of Status
Consist Instructions to	Titing Officer	
Special Instructions to	Filing Officer:	

Office Use Only



000240795500



10/16/12--01022--006 \*\*52.50



100/17/12

## JOHN J. KABBOORD, JR.

A PROFESSIONAL ASSOCIATION

TELEPHONE (821) 799-3388

FAX (821) 799-4499

Website: http://www.kabboord.com

ATTORNEYS

JOHN J. KABBOORD, JR.
Email: john@kabboord.com

STEPHANIE A. ESTRADA Email: stephanie@kabboord.com

October 9, 2012

Amendment section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Articles of Amendment for Vista Bella, Inc.

#### Dear Sir/Madam:

SUITE 801

1980 N. ATLANTIC AVENUE COCOA BEACH, FLORIDA 38931

OF COUNSEL
F. PALMER WILLIAMS

Enclosed please find an original and one copy of the executed Articles of Amendment for filing, together with check in the amount of \$52.50 to cover the necessary filing fees as follows:

Filing Fee	\$ 35.00
Certificate of Status	\$ 8.75
Certified Copy (w/ Additional Copy)	\$ 8.75
TOTAL:	\$ 52.50

Your expedited assistance in filing these Articles is appreciated, and should you have any questions, please do not hesitate to contact this office.

Sincerely,

JÓÁN J. KABBOORD, JR.

JJKjr/sae Enclosures

CC:

Mr. Richard Barcant Mrs. Maren Barcant

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	VISTA BELLA, INC	<b>.</b>		
DOCUMENT NUMBER:	612789			
The enclosed Articles of Amendm	ent and fee are submitted t	or filing.		
Please return all correspondence co	oncerning this matter to the	e following:		
	MAREN BARCANT			
		of Contact Person		
	NICTA DELLA TA			
	<u>VISTA BELLA, IN</u> F	ii Firm/ Company	n in	
	P.O. BOX 540308	Address	<u> </u>	
	MERRITT ISLAND,	FLORIDA 329	54	
··· ··· ···		State and Zip Code	JT	
	City	State and Zip Code		
E-mail	address: (to be used for fi	iture annual report n	otification)	
For further information concerning	this matter, please call:			
MAREN BARCANT	· · · · · · · · · · · · · · · · · · ·	" \	783-5453	
Name of Contact Po	erson	Area Code	e & Daytime Telephone Number	
Enclosed is a check for the following	ng amount made payable t	o the Florida Depar	tment of State:	
	ficate of Status Cert (Add	.75 Filing Fee & tified Copy ditional copy is losed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addres	<u>is</u>	Street A	ddress	
Amendment Sec			nent Section	
Division of Corp P.O. Box 6327	oorations		of Corporations Building	
Tallahassee, FL	32314		ecutive Center Circle	
-,		Tallahassee, FL 32301		

### Articles of Amendment Articles of Incorporation

FILED

	of		
VISTA BELLA, INC.		2012 OCT 16	AM 10: 19
	currently filed with the Florida Dept. of State)		
612789		SECHETARY STALLAHASSE	E. FLORIDA
(Document	Number of Corporation (if known)	3	_
rsuant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corpora	ation adopts the follow	ving amendme
If amending name, enter the new name	me of the corporation:		
•			The new
	ain the word "corporation," "company," or ". ation "Corp," "Inc," or "Co". A professional of ion," or the abbreviation "P.A."		
Enter new principal office address, it			
Principal office address <u>MUST BE A ST</u>	<u>KEET ADDKESS</u> )		
. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
(Matting dadress MAT BE A POST O	TFICE BUX)		<del></del>
	·		
If amending the registered agent and	Nor registered office address in Florida, enter t	he na me of the	
. If amending the registered agent and new registered agent and/or the new	l/or registered office address in Florida, enter t	he na me of the	_
new registered agent and/or the new	registered office address:	he name of the	_
		he na me of the	_
new registered agent and/or the new	registered office address:  MAREN BARCANT	he na me of the	_
new registered agent and/or the new	registered office address:	he na me of the	
<u>Name of New Registered Agent</u>	registered office address:  MAREN BARCANT  233 ANTIGUA DRIVE  (Florida street address)		_
new registered agent and/or the new	registered office address:  MAREN BARCANT  233 ANTIGUA DRIVE  (Florida street address)	he name of the  Florida 32931  (Zip Code)	

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: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	PD	KEVIN C. BARCANT	233 ANTIGUA DRIVE		
Add			COCOA BEACH, FLORIDA 32931		
X Remove					
2) X Change	PDS	MAREN BARCANT	233 ANTIGUA DRIVE		
Add			COCOA BEACH, FLORIDA 3293		
Remove					
3 ) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		<del></del>			
Add					
Remove					

Attach	additional sh	ing additional Ai eets, if necessary)	(Be specifi	nange(s) nere:			
			<del> </del>				<u> </u>
			<del></del>				
				<del></del>		<del></del>	· · · · · · · · · · · · · · · · · · ·
	<u>-</u>		<del></del>				
<del></del>	<u>-</u>						
		<u> </u>					
					<del></del>		
	<del>.</del>						
	· · · · · ·						
		,					
provis	sions for imp	rovides for an ex lementing the ar ble, indicate N/A)	nendment if n	ssification, or c ot contained in	ancellation of i the amendmer	ssued shares, nt itself:	
		-					<u>-</u>

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
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"
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 October 4, 2012 Signature Marcaul
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
MAREN BARCANT
(Typed or printed name of person signing)
PDS
(Title of person signing)