| (Red                      | questor's Name)   |             |
|---------------------------|-------------------|-------------|
| (Add                      | dress)            |             |
| (Add                      | dress)            |             |
| (City                     | y/State/Zip/Phone | e #)        |
| PICK-UP                   | WAIT              | MAIL        |
| (Bu:                      | siness Entity Nar | ne)         |
| (Dod                      | cument Number)    |             |
| Certified Copies          | Certificates      | s of Status |
| Special Instructions to I | Filing Officer:   |             |
|                           |                   | :           |
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Office Use Only



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October 27, 2010

CHARLES PATTERSON
PATTERSON PROPERTY MANAGEMENT, INC.
5300 W.HILLSBORO BLVD #202
COCONOT CREEK, FL 33073

SUBJECT: SHORE HOUSE - A CONDOMINIUM, INC.

Ref. Number: 717590

We have received your document for SHORE HOUSE - A CONDOMINIUM, INC. 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 profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

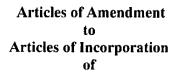
Letter Number: 310A00025422

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: SHORE HOU  | SE - A CONDOMINIUM  | M, INC.   |
|-------------------------|--|---|---|
| DOCUMENT NUM            | BER: 717590  |   |   |
| The enclosed Articles   | s of Amendment and fee are sul   | omitted for filing.   |   |
| Please return all corre | espondence concerning this mat   | tter to the following:  |   |
|                         |  | S PATTERSON   |   |
|                         | (Name of   | Contact Person)   |   |
|                         | PATTERSON PROP   | ERTY MANAGEMENT, INC  | D   |
|                         | (Firm  | n/ Company)   |   |
|                         | 5300 W. HILL   | SBORO BLVD. #202  |   |
|                         | (,   | Address)  |   |
|                         | COCONUT  | CREEK, FL 33073   |   |
|                         | (City/ Sta   | ite and Zip Code)   |   |
|                         | charles.v.pat  | tterson@gmail.com   |   |
|                         | E-mail address: (to be use   | ed for future annual report notific   | cation)   |
| For further information | on concerning this matter, pleas   | e call:   |   |
| CHARLES PATT            | ERSON  | at ( 954 ) 677-95   | 55  |
| (Name                   | of Contact Person)   | (Area Code & Dayti  | me Telephone Number)  |
| Enclosed is a check for | or the following amount made p   | payable to the Florida Departmen  | nt of State:  |
| ☑ \$35 Filing Fee       | ☐ \$43.75 Filing Fee & Certificate of Status                             | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)                           | ☐ \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
| Amer<br>Divis<br>P.O.   | ing Address adment Section ion of Corporations Box 6327 passee, FL 32314 | Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Center | ons   |

Tallahassee, FL 32301





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

SHORE HOUSE - A CONDOMINIUM, INC.

(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:

| The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company" o                  |                   | •                                      | corporated" or the            |
|---|-------------------|--|-------------------------------|
| B. Enter new principal office address, if app<br>(Principal office address MUST BE A STREE            |                   | 5300 W. HILLSBO                        | DRO BLVD.                     |
|   |                   | #202                                   |                               |
|   |                   | COCONUT CREE                           | EK, FL 33073                  |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI                       | _                 | SE BOX) 5300 W. HILLSBORG              |                               |
|   |                   | #202                                   |                               |
|   |                   | COCONUT CREE                           | K, FL 33073                   |
| D. If amending the registered agent and/or new registered agent and/or the new regi                   |                   |  | nter the name of the          |
| Name of New Registered Agent:   | CHARLES PATTERSON |  |                               |
| New Registered Office Address:  |                   | LSBORO BLVD. #2<br>ida street address) | 202                           |
|   | coco              | ONUT CREEK (City)                      | , Florida 33073<br>(Zip Code) |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered position. | 1 agehi. 1 am     |  | ept the obligations of the    |

## 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    |
|-------------------------------|---|----------------|-------------------|
|                               |   |                | ☐ Add ☐ Remove    |
| <del></del>                   |   |                | ☐ Add<br>☐ Remove |
|                               |   |                | ☐ Add<br>☐ Remove |
| E. If amendin<br>(attach addi | g or adding additional Articles, enter cl<br>tional sheets, if necessary). (Be specific | hange(s) here: |                   |
|                               |   |                |                   |
|                               |   |                |                   |
|                               |   |                |                   |
|                               |   |                |                   |
|                               |   |                |                   |
|                               |   |                | <u> </u>          |

| The date of each amendmen                            | t(s) adoption: 10/21/2010   |
|--|---|
| Effective date <u>if applicable</u> :                | (date of adoption is required)  |
|  | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                             | (CHECK ONE)   |
| The amendment(s) was/we was/were sufficient for app  | ere adopted by the members and the number of votes cast for the amendment(s) proval.  |
| ✓ There are no members or adopted by the board of di | members entitled to vote on the amendment(s). The amendment(s) was/were rectors.  |
| Dated_10/2 Signature_                                | 21/2010<br>CD m. Or.  |
| (By  | the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary) |
|  | ODETTE SAMUELS  |
|  | (Typed or printed name of person signing)   |
|  | PRESIDENT   |
|  | (Title of person signing)   |

Page 3 of 3