755071

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(Address)	
(Address)	
, , ,	
(City/State/Zip/Phone #)	
(City/State/Zip/Phone #)	
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COVER LETTER

<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations	West of the last o
NAME OF CORPORATION:	
755071 DOCUMENT NUMBER:	M. Contraction
The enclosed Articles of Amendment and fee are submitted for filing.	ري الله الله الله الله الله الله الله الل
Please return all correspondence concerning this matter to the following:	
Michael Bevis	
(Name of Contact Person)	
(Firm/ Company)	
102 Hailmark Avenue	
(Address)	
Lake Placid, FL 33852	
(City/ State and Zip Code)	
mike@bevisconstructioninc.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Michael Bevis 863 441-4684	
(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:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is Enclosed)	
Mailing Address Street Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Articles of Amendment Articles of Incorporation

ADAMSTOWN I OF AVON PARK, INC.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
755071	•
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>on:</u>
N/A	The new
name must be distinguishable and contain the word "corporate "Company" or "Co," may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	102 Hallmark Avenue
(Principal office address MUST BE A STREET ADDRESS)	Lake Placid, FL 33852
 C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac 	
Michael B	
Name of New Registered Agent:	nark Avenue
New Registered Office Address:	(Florida street address)
Lake Plac	id , Florida 33852
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
Si	ignature of New Registered Agent, if changing

Page 1 of 4

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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PSTD	JAMES E. TOMPKINS	215 East Park Street
Add			Lake Placid, FL 33852
X Remove			
2) Change	DVP	W. JAMES KELLY	6506 Lunn Road
Add			Lakeland, FL 33811
X Remove			
3) Change	Director	LOUISE B. TOMPKINS	215 East Park Street
Add			Lake Placid, FL 33852
X Remove			
4) Change	RA	JAMES E. TOMPKINS	215 East Park Street
Add			Lake Placid, FL 33852
X Remove			
5) Change	VP	MICHAEL BEVIS	102 Hallmark Avenue
X Add			Lake Placid, FL 33852
Remove			
6) Change	P	BYRON CHAPMAN	102 Hallmark Avenue
X Add			Lake Placid, FL 33852
Remove			

attach additional shee	g additional Articles its, if necessary). (B	Be specific)	nete.	
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	date of each amendment(s) this document was signed.	adoption:	, if other than the
Effe	Sective date <u>if applicable</u> :	eptember 26, 2016	
		(no more than 90 days after amendment file date)	
		block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Ada	option of Amendment(s)	(CHECK ONE)	
Ä	The amendment(s) was/were was/were sufficient for appr	adopted by the members and the number of votes cast for the aroval.	mendment(s)
	There are no members or m adopted by the board of directions	mbers entitled to vote on the amendment(s). The amendment(s) ctors.) was/were
	Dated	26/16	
	Signature	alla.	
	have not	airman or vice chairman of the board, president or other officer- been selected, by an incorporator – if in the hands of a receiver, rt appointed fiduciary by that fiduciary)	
		Hichael Bevis (Typed or printed name of person signing)	
		Vice President RA (Title of person signing)	