

G79686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

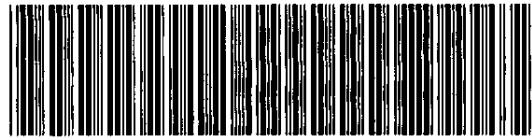
(Document Number)

Certified Copies

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10/08/10--01021--013 **52.50

Amend/RC

FILED
10 OCT 19 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts OCT 21 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2010

BRIAN MANKE
BURLINGTON BUILDERS INC
3804 SW 21 ST
CAPE CORAL, FL

SUBJECT: BURLINGTON BUILDERS, INC.
Ref. Number: G79686

We have received your document for BURLINGTON BUILDERS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #L10000025828 - VENETIAN POOLS AND SPAS L.L.C.

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: 510A00023996

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Burlington Builders Inc

DOCUMENT NUMBER: G79686

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Manke

Name of Contact Person

Burlington Builders Inc

Firm/ Company

3804 Sw 21St

Address

Cape Coral Fl

City/ State and Zip Code

skybri2000@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Manke

Name of Contact Person

at (239)

292-8299

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Certificate of Status
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
of

Burlington Builders, Inc.

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

G79686

(Document Number of Corporation (if known))

FILED

10 OCT 19 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Venetian Pools and Spas Inc

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."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

3804 Sw 21st Pl

Cape Coral, FL

33914

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

4519 SE 16th Pl suite 101

Cape Coral, FL

33904

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:

New Registered Office Address:

(Florida street address)

(City)

_____, Florida
(Zip Code)

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.

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 10/06/2010
(date of adoption is required)
Effective date if applicable: 10/06/2010
(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 _____."
(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 10/06/2010

Signature _____

(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)

Brian Manke

(Typed or printed name of person signing)

President

(Title of person signing)

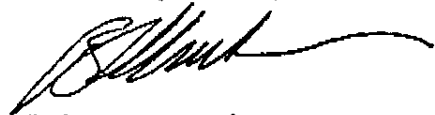
October 21, 2010

Tina Roberts
Florida Division of Corporations
Fax : 1-850-245-6897

Dear Ms Roberts,

This letter is to confirm that we will not be revoking the dissolution of Venetian Pools and Spas, LLC. We are releasing the name for reuse.

Sincerely Yours,

A handwritten signature in black ink, appearing to read "B. Manke", with a long horizontal flourish extending to the right.

Brian J. Manke
Managing Officer