500922

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300207919653

05/26/11--01006--020 **43.75

DIVISION OF CORPORATIONS

11 MAY 25 AM II: L.8

Annel 2011
Annel 2011
Annel 2011
Annel 2011

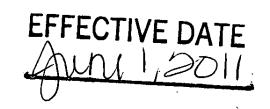
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:	e of Palms Managemen	t, Inc.
DOCUMENT NUMBER	R:	J00922	
The enclosed Articles of	Amendment and fee are s	submitted for filing.	
Please return all correspo	ndence concerning this n	natter to the following:	
		een H. DiCosola	
	Name	e of Contact Person	
		ns Management, Inc.	
	F	Firm/ Company	
	7400 4	6th Avenue North	
		Address	
		ourg, FL. 33709-2534	<u> </u>
	·	State and Zip Code	
	parkmgr E-mail address: (to be used fo	@gmail.com or future annual report notification)	
For further information c	oncerning this matter, ple	ease call:	
Maureen	H. DiCosola	at (727)5	41-2222
Name of Con	tact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for the	ne following amount mad	e payable to the Florida Depar	tment of State:
	\$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 Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	ion orations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Isle of Palms I	Management, Inc	,	
(Name of Corporation as current	tly filed with the Floric	la Dept. of State)	
JO	00922		
(Document Number	er of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	Iorida Profit Corporation ac	lopts the following
A. If amending name, enter the new name of the	he corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profes	esignation "Corp," "Inc	c," or "Co". A professional	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET.			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regnew registered agent and/or the new registered agent. Name of New Registered Agent:	istered office address i	in Florida, enter the name of	SECRETARY OF STATE BOWNS OF CORPORATIONS 11 MAY 26 AM 11: 48
<u>New Registered Office Address:</u>	(Florida street d	address)	
		, Florida	
_	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age Sign			he position.

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>	Name	Address	Type of Action
<u> </u>	Maureen H. DiCosola	9373 1st Street NE St. Petersburg, FL. 33702-2629	☐ Add ☑ Remove
VP/S	Katherine Paluzzi	7400 46th Avenue North St. Petersburg, FL. 33709-2634	☑ Add □ Remove
<u>D</u>	Katherine Paluzzi	7400 46th Avenue North St. Petersburg, FL. 33709-2534	☑ Add □ Remove
E. If amending (attach addit	g or adding additional Articles, enter clional sheets, if necessary). (Be specific	hange(s) here:	
provisions	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)		

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>	Type of Action
D	Patricia Wertenberger	323 Silver Pine Drive Lake Mary, FL, 32746	☑ Add ☐ Remove
D	Penelope Burns	1 Weston Drive Poquoson, Va. 23662	_
(attach a	additional sheets, if necessary). (Be s	pecific)	
provisi	mendment provides for an exchange ions for implementing the amendment applicable, indicate N/A)		

The date of each amendmen	nt(s) adoption: 5/50/11
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
The amendment(s) was/w	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/waction was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_5-2	0-11
Signature _ (B se	Maure of Cotola President or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Maureen DiCosola
	(Typed or printed name of person signing)
	President
	(Title of person signing)