K59567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

Office Use Only

10 27 09

700161463947

10/13/09--01039--011 **52.50

FILED
2009 OCT 26 PM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

S

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ART'S PLACE OF DELEON SPRINGS, INC.

DOCUMENT NUMBER: K59567

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

Please return all correspondence concerning this matter to the following:

PAUL J. KATREK
Name of Contact Person

Firm/ Company

416 N. VOLUSIA AVE.
Address

LAKE HELEN, FL 32744
City/ State and Zip Code

pkatrek@cphengineers.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL KATREK at (386) 956-1250
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
- ☐ $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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2009

K
PAUL J. ~~Z~~ATREK
416 N. VOLUSIA AVENUE
LAKE HELEN, FL 32744

SUBJECT: ART'S PLACE OF DELEON SPRINGS, INC.
Ref. Number: K59567

We have received your document for ART'S PLACE OF DELEON SPRINGS, INC. and check(s) totaling $52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

SORRY, I FORGOT. I SIGNED IT NOW.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 909A00033030

ECEIVED
2009 OCT 26 AM 8:00
ETARY OF STATE
HASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

2009 OCT 26 PM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ART'S PLACE OF DELEON SPRINGS, INC.

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

K59567

(Document Number of Corporation (if known)

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:

_______________ *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)

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

PAUL KATREK
416 N. VOLUSIA AVE.
LAKE HELEN, FL 32744

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)

_______________, Florida _______________
(City) *(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)

Title	Name	Address	Type of Action
PVS	PAUL KATREK	416 N. VOLUSIA AVE. LAKE HELEN, FL 32744	☐ Add ☑ Remove
PVS	BRADLEY S. PATTERSON	1627 KEELING DRIVE DELTONA, FL 32738	☑ Add ☐ Remove
			☐ Add ☐ 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)

100% OF SHARES TO BRADLEY PATTERSON UNTIL COMMERCIAL PROPERTY LEASE HAS BEEN TERMINATED. AT THE TIME OF TERMINATION OF SAID LEASE 100% OF SHARES WILL RETURN TO PAUL KATREK.

The date of each amendment(s) adoption: OCTOBER 9, 2009
(date of adoption is required)

Effective date if applicable: OCTOBER 9, 2009
(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 OCTOBER 9, 2009

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)

PAUL J. KATREK
(Typed or printed name of person signing)

PVS
(Title of person signing)