## ND200008776

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TROPIC ISLE	s Co-op INC.
DOCUMENT NUMBER: NO 2 0 0 0 0 0	
The enclosed Articles of Amendment and fee are submitted for	
-	
Please return all correspondence concerning this matter to the f	ollowing:
PANL SMM (Name o	<b>;</b>
. (Name o	f Contact Person)
TROPIC ISLES	CO-OP INC
(Fin	n/ Company)
1503 28th Ave	Address)
	Address)
PALMETTO FL (City/ Str	- 34221
(City/ Sta	ate and Zip Code)
PAUL @ TROPICIA E-mail address: (to be used for futur	SLES.NET
•	e annual report notification)
For further information concerning this matter, please call:	
PAUL SMITH	at 941 721-8888 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to t	he Florida Department of State:
	ed Copy Certificate of Status ional copy is Certified Copy
Mailing Address  Amendment Section	Street Address Amendment Section

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



April 16, 2018

PAUL SMITH TROPIC ISLES CO-OP, INC. 1503 28TH AVE W PALMETTO, FL 34221

SUBJECT: TROPIC ISLES CO-OP, INC.

Ref. Number: N02000008776

We have received your document for TROPIC ISLES CO-OP, 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 118A00007545

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www.sunbiz.org

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## Articles of Amendment to Articles of Incorporation of

TROPIC ISLES C	0-0P	INC		
(Name of Corporation as curren	itly filed wi	th the Florid	a Dept. of State)	
N020000	28116	,		
(Document Numb	er of Corpo	ration (if kno	wn)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Flor</i>	ida Not For l	Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporat	ion:			
· N.A.				The new
N.Y.  name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ition" or "ir	corporated"	or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		· A .		- t-
(11mapa office address MOST BE A STREET ADDRESS	, 			
				<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<i>N</i>	A.		
	<del>.</del>			- S
		<del>_</del>		<u> </u>
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		in Florida, ei	nter the name of th	ne Es T
Name of New Registered Agent:	NIA			
		(Flori	ida street address)	
New Registered Office Address:				
	NA.		, Floric <i>(Zip</i>	la
	(City)		(Zip	Code)
New Registered Agent's Signature, if changing Registered land hereby accept the appointment as registered agent. I am fa		and accept th	ne obligations of the	position.
		N. g.		
S	Signature of	New Register	ed Agent, if changi	ng

## 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>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	_5_	MARK KREUGER	294 NASSAN DRIVE PALMETTO FL 34221
2)	<u>5</u>	GARY REASE	223 BIMINI DRIVE PALMETTO FL 34221
Remove  3) Change Add  Remove		WAYNE GEOFFRION	266 JAMAICA DRIVE PALMENTO PL 34221
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(anach additional sheets, if necessary).	Be specific)			
N.A.				
	·.			
<del></del>				

The date of each amendment(s) ad late this document was signed.	option: <u>MARCH</u> 29, 2018	, if other than th
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocoment's effective date on the Dep	ck does not meet the applicable statutory filing requirements. to partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east for the an	nendment(s)
There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) rs.	was/were
Dated DPR	- 24, 2018	
Signature Mal		
have not bee	nan or vice chair han of the board, president or other officer-in selected, by an incorporator — if in the hands of a receiver, the ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	