NO2531

(Requestor's Name)	
(Address)	400371623
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	08/18/21010090
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



3084

21 ++35.00

្រ ប៉ុន្តិ

V

SEP 28 2021 I ALHRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PARADISE BAY	ESTATES, INC.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma-	tter to the following:		
SCOTT E. GORDON, ESQ.			
	(Name of Contact Pe	erson)	
LUTZ, BOBO & TELFAIR, P.A.			
	(Firm/ Company	·)	
2 N. TAMIAMI TRAIL, SUITE 500			
	(Address)		
SARASOTA, FL 34236			
	(City/ State and Zip (Code)	
SGORDON@LUTZBOBO.COM			
E-mail address: (to be use	d for future annual rep	ort notification	1)
For further information concerning this matter, pleas	e call:		
SCOTT E. GORDON		941	951-1800
(Name of Contact Person	n) at	(Area Code)	(Daytime Telephone Number)
inclosed is a check for the following amount made p	ayable to the Florida I	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		eet Address	
Division of Corporations		endment Sectifision of Corpo	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



#21 SEP 27 PM 3: 46

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2021

SCOTT E. GORDON, ESQ. LUTZ, BOBO & TELFAI, P.A. 2 N. TAMIAMI TRAIL - STE. 500 SARASOTA, FL 34236

SUBJECT: PARADISE BAY ESTATES, INC.

Ref. Number: N02531

We have received your document for PARADISE BAY ESTATES, 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

A photo copy of the signature is not acceptable for non-profit corporations as an original signature is required.

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 III

Letter Number: 421A00021505

Articles of Amendment to Articles of Incorporation of

PARADISE BAY ESTATES, INC.					
(Name of Corporation as currently filed with th	e Florida D	ept. of Stat	<u>e</u>)		
N02531					
(Docum	nent Numbe	er of Corpor	ation (if kno	own)	
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Flori</i> d	da Not For	Profit Corporation adopts	the following
A. If amending name, enter the new name of th	<u>e corporati</u>	on:			
					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	<u>e</u>	ion" or "inc	corporated"	or the abbreviation "Corp	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					
· · · · · · · · · · · · · · · · · · ·	,				
					- -1
					2021 SE 27 PH
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROV)				52
<u> </u>	<u>13.07.1</u> 7				2
					
					PZ
D. If amouding the paristant and anot and/or and	result office	a adduses in	n Elawida, a	ntan the name of the	ب س پ
D. If amending the registered agent and/or reginew registered agent and/or the new register			a rio <u>rida, e</u>	mer the name of the	<u>ئ</u> رى
Name of New Registered Agent;		. GORDON	, ESQ.		
<u> </u>	2 N.TAM	IAMI TRAI	L. SUTIE 5	00	
				ida street address)	
New Registered Office Address:	:		•	•	
	SARASO	TA		. Florida	36
		(City)		(Zip Code)	
New Registered Agent's Signature, if changing I	Qonistored	A gent:			
I hereby accept the appointment as registered agen			nd accept th	ne obligations of the positio	on.
	X	let ?	<u> </u>	_	
_	Sig	gnature of N	av Register	ed 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)

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: XChange XRemove XAdd	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change Add	<u>.T</u>	GARY ROMIG	10315 CORTEZ RD W 17-WPT
x Remove			BRADENTON, FL 34210
2) Change Add	<u>T</u>	DIANE WILDER	10315 CORTEZ RD W 17-WPT
Remove 3) Change Add Remove			BRADENTON, FL 34210
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			-
	<u></u>		
			- 111

		
		·
	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		
		<u>. </u>
		
The date of each amendment(s) adoption:date this document was signed.		, if other than the
Effective date if applicable:	han 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State	the applicable statutory filing requirements, this date will 's records.	not be listed as the
Adoption of Amendment(s) (CHECK	<u>ONE</u>)	
☐ The amendment(s) was/were adopted by the me was/were sufficient for approval.	mbers and the number of votes cast for the amendment(s)	

.

.

Ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 9-21-2021
	Signature
	(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)
	RANDY DARR
	(Typed or printed name of person signing)
	PRESIDENT BOD
	(Title of person signing)