## Fig. 27/2009 4/2009 THE LAW OFFICES OF MICK & BURNESSES S. 1 Division of Comporations

## Florida Department of State

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Account Number : I20070000020 Phone : (813)435-3176

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2/27/2009

TR 2-2-19

## **Articles of Amendment** Articles of Incorporation

			State) State		
Articl	les of Amendm	ent	30 8		
to Yes					
Articles of Incorporation of					
	O1		570		
PARADISE GA					
(Name of Corporation as current	tly filed with the	Florida Dept. of S	State State		
N080	000006766		OFF. 6		
(Document Numb	er of Corporation	(if known)	OP.		
Pursuant to the provisions of section 617.1006, Fithe following amendment(s) to its Articles of Income		is <i>Florida Not For</i>	Profit Corporation adopts		
A. If amending name, enter the new name of t	he corporation:				
The new name must be distinguishable and con	tain the word "c	arporation" ar "i	ncornorated" or the		
abbreviation "Corp." or "Inc." "Company" or			worper and a sir viva		
H. Enter new principal office address, if applic	cable:				
(Principal office address MUST BE A STREET					
	_		<del></del>		
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>E BOX</u> )				
	_	<del></del>			
D. If amending the registered agent and/or reg			enter the name of the		
new registered agent and/or the new registe	erea omice saare	<u>:55;</u>			
Name of New Registered Agent:					
New Registered Office Address:	(Florida	street address)	<del></del>		
7.011 110g	(2 121 1111				
		<del></del>	, Florida		
	(	City)	(Zip Code)		
New Registered Agent's Signature, if changing	Registered Age	nt:			
I hereby accept the appointment as registered of	agent. I am far	niliar with and acc	cept the obligations of the		
position.					
Sig	nature of New Re	gistered Agent, if c	hanging		

Page 1 of 3

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		
P,S,T	CICALE, DESIREE	514 WEST GREGORY ST. PENSACOLA FL 32501 US			
<u>P,S,T</u>	CICALE, JOHN	514 WEST GREGORY ST PENSACOLA FL 32501 US	☐ Add ☐ Remove		
<u>D</u>	BILLIE REED	514 WEST GREGORY ST PENSACOLA FL 32501 US	Add Remove		
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  IN ADDITION TO BEING ADDED AS PRESIDENT, SECRETARY AND TREASURER,  JOHN CICALE WILL ALSO BE ADDED AS THE FACILITIES/FACILITATING MANAGER					
JOHN CICAL	LE WILL ALSO BE ADDED AS IT	IE FACILITIES/FACILITATII	IG WANAGEN		
FURTHERMORE, DOUG MILLER SHALL BE ADDED AS A DIRECTOR.					
		<u> </u>			
		<del> </del>			
			· · · · · · · · · · · · · · · · · · ·		
***********************					

Feb 27 2009 3:55PM Fax Station : THE LAW OFFICES OF NICK SPRADIAN, PLIC FEB-27-2009 14:41 FROM: SANTA ROSA ADULT SCH 8509835345 TO: 918133336358 The date of each amendment(s) adoption: FEBRUARY, 25, 2009 Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. 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 FEBRUARY 25, 2009 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) CICALE, DESIREE (Typed or printed name of person signing) PRESIDENT (Title of person signing)

Page 3 of 3