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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALLIAMASSEF FINANCE

Anero C.COULLIETTE

SEP 21 2009

EXAMINER

· COVER LETTER

INC

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Collier G	olden Gate Ho	mmerheads
DOCUMENT NUMBER: ND90000.	5500	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Mario Do (Name of C	ORIO ontact Person)	
(Firm/ C	Company)	
7795 Davis Bl	lvd, Ste 205	
Naples, FL 3 (City/ State	and Zip Code)	
hammerhead base E-mail address: (to be used to	ball@amail.co) <u>m</u>
For further information concerning this matter, please of	eall:	
Mario Doria (Name of Contact Person)	at (<u>239</u>) <u>289</u> (Area Code & Daytime	
Enclosed is a check for the following amount made pay	able to the Florida Department of	State:
\$35 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 Ci	·

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ollier	Golden	Gate	Hammerheads	INC
(Name of C	Corporation as cu	rrently filed	with the Florida Dept. of State)	

(Name of Corporation as currently filed with	the Florida Dept. of State)
NOYOOOO5500 (Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, the following amendment(s) to its Articles of Incorporation:	F. 9
A. If amending name, enter the new name of the corporation	n:
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
B. Enter new principal office address, if applicable:	7795 Davis Blud
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ste 205
	Noples, FL 34104
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7795 Davis Blvd
	Ste 205
	Naples, FL 34104
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent: Mario	Doria
New Registered Office Address: (Flori	Davis Blvd Ste 205 ida street address)
Naples	(City), Florida 341 04 (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position	

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
DIR	Lee Gariepy JR	2941 Inlet Cove	ELn Add
		Naples, FL 341	ZO Remove
			<u> </u>
			_
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be spec		
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The date of each amendment(s) adoption: September 1, 2009
(date of adoption is required) 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.
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)
Mario Doria (Typed or printed name of person signing) Director
(Title of person signing)

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