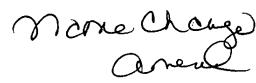
N110000009316

| (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: |
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Office Use Only



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AVE 13 2015 ARAMSEY

COVERLETTER

TO: Amendment Section

Division of Corporations

| IAME OF CORPORATION: PATE COMMUNITY DEUS 10 PROPERTY COM |
|---|
| OCUMENT NUMBER: <u>W 100000 93/6</u> |
| he enclosed Articles of Amendment and fee are submitted for filing. |
| lease return all correspondence concerning this matter to the following: |
| Name of Contact Person) |
| PATS COMMONITY DEJEB PINEWIT COR. |
| 13758 Dovan Les Dr. S. (Address) |
| Jackson wille, 31 30026 (City/State and Zip Code) |
| 2: x+ C 200 Q Jahon Com E-mail address: (to be used for future annual report notification) |
| or further information concerning this matter, please call: |
| Andoio Pale at (90H) 3 10 - 1903 (Name of Contact Person) (Area Code) (Daytime Telephone Number) |
| nclosed is a check for the following amount made payable to the Florida Department of State: |
| Striling Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section Street Address Amendment Section |
| Amendment Section Division of Companytions Division of Companytions |

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

Articles of Amendment

to Articles of Incorporation

FILED

| | of |
|---|---|
| N1100000931 | scurrently filed with the Florida Dept. of State) AND STATE OF TALEAHASSES, FLORIDA ON Number of Corporation (if known) |
| Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation: | a Statutes, this Florida Not For Profit Corporation adopts the following |
| "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable | corporation" or "incorporated" or the abbreviation "Corp." or "Inc." 13758 Devantee Dr. E. |
| (Principal office address MUST BE A STREET ADD C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | Sacksonulle, d. 32226 |
| D. If amending the registered agent and/or register new registered agent and/or the new registered | |
| Name of New Registered Agent: | A) A |
| Nume of New Registered Agent. New Registered Office Address: — | (Florida street address) Florida (City) (Zip Code) |
| New Registered Agent's Signature, if changing Reg | istered Agent: |
| i nereby 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)

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 | PT John D V Mike J SV Sally S | lones | |
|-----------------------------------|---|-------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | 10-10-10-10-10-10-10-10-10-10-10-10-10-1 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| S) Charac | | | |
| 5) Change | | | |
| Add | | | · |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or adding additional Articutes and additional sheets, if necessary). | (Be specific) |
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| The date of each amendment(s) adoption: OB O O O O O O O O O O O O O O O O O O | the |
|--|-----|
| Effective date if applicable: (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. | |
| 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 08/06/2015 | |
| Signature Carlos Company 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) | |
| (Typed or printed name of person signing) | |
| Director | |

(Title of person signing)