N17000008224

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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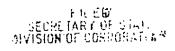
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UL 19 2018

COVER LETTER

TO: Amendment Section Division of Corporations



288 JUL 16 PH 48 18

NAME OF CORPORATION:	ROMP IN THE SWA	AMP NAPLES, INC	20.1	TOT IS LUCIE IN	
NI	7000008224				
DOCUMENT NUMBER:					
The enclosed Articles of Amena	lment and fee are subm	nitted for filing.			
Please return all correspondence	concerning this matter	r to the following:			
ESTELA MORALES					
	ı	(Name of Contact Pe	erson)		
AXIOM ACCOUNTING PA					
		(Firm/ Company	r)		
4951 TAMIAMI TRAIL NORT	TH SUITE 103				
		(Address)			
NAPLES, FL 34103					
	((City/ State and Zip (Code)	-	
ESTELAMORALES07@COM	CAST.NET				
E-ma	il address: (to be used	for future annual rep	ort notification	1)	
For further information concerni	ing this matter, please o	call:			
ESTELA MORALES		at	2393023788		
(Na	ime of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	wing amount made pay	yable to the Florida I	Department of S	State:	
□ \$35 Filing Fee □	\$43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy is osed)	

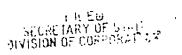
Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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ROMP IN THE SWAMP NAPLES, INC

2818 JUL 16 PM 18 18

	Edit age
(Name of Corporation as	currently filed with the Florida Dept. of State)
N17000008224	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:
	The ne
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOY	<u>Y</u>)
D. If amending the registered agent and/or registere	
new registered agent and/or the new registered of	office address:
Name of New Registered Agent:	
<u>New Registered Office Address:</u>	(Florida street address)
	, Florida
	·
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent. I	stered 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 raddress 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change			
Add			<u> </u>
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u>-</u>	
Add			
Remove			
6) Change			
Add			
Remove		Puga 7 of d	

(attach additional sheets, if necessary).—(Be specific)
Said Organization is organized exclusively for charitable, religious educational and scientific purposes, including, for such
purposes, the making of distribution to organizations that qualify as exempt organizations describe under 205(c)(3), of
the Internal Revenue Code, or corresponding section of any future federal tax code.
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning
501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed
to the federal government, or state or local government, for public purposes or to such organization or organizations, as
said Court shall determine, which are organized and operated exclusively for such purposes.

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were prs.	
Dated - 10	1-18	
have not be	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
<u>Ir</u>	(Typed or printed name of person signing)	
Pra	sident	
	(Title of person signing)	