N47854

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Gretoin Association of Haples and south west florida. Inc.
and south west Florida. Inc.
DOCUMENT NUMBER: × 47854
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
George Mountrokis (Name of Contact Person)
(Name of Contact Person)
Gretan Association of Maples and S.W. Florida Inc (Firm/Company)
1620 Desolo Blud H. (Address)
(Address)
Maples, FL 34 120 (City/State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
George Mountraga's at (239) 465 3008 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

·· —	with the Florida Dept. of State)	
N 47 6	954 Jumber of Corporation (if known)	
(Document N	lumber of Corporation (if known)	
nant to the provisions of section 617,1006, Floadment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Corporation	n adopts the following
f amending name, enter the new name of th	he corporation:	
	×4 /A	The new
e must be distinguishable and contain the wor npany" or "Co." may not be used in the nam	rd "corporation" or "incorporated" or the abbreviati	on "Corp." or "Inc."
tpuny or Co. may not be used in the num	<u>ne</u> .	
nter new principal office address, if application		
cipal office address <u>MUST BE A STREET A</u>	ADDRESS)	
		
Enter new mailing address, if applicable:	. / ~	
Mailing address <u>MAY BE A POST OFFICE</u>	(BOX) $/A$	
Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>	
Mailing address <u>MAY BE A POST OFFICE</u>	E BOX) / / //	
Mailing address <u>MAY BE A POST OFFICE</u>	<u> </u>	
amending the registered agent and/or reg	gistered office address in Florida, enter the name of	the Carlo
f amending the registered agent and/or reg ew registered agent and/or the new registe	gistered office address in Florida, enter the name of ered office address:	the The AP
f amending the registered agent and/or reg	gistered office address in Florida, enter the name of ered office address:	the PR
If amending the registered agent and/or registerew registered agent and/or the new registe	gistered office address in Florida, enter the name of ered office address:	APR 14
f amending the registered agent and/or registe ew registered agent and/or the new registe Name of New Registered Agent:	gistered office address in Florida, enter the name of ered office address:	14 APR 14 PH
If amending the registered agent and/or reg new registered agent and/or the new registe	zistered office address in Florida, enter the name of ered office address: / / A	APR 14
new registered agent and/or the new registe Name of New Registered Agent:	zistered office address in Florida, enter the name of ered office address: / / A	APR 14 PH

Page 1 of 4

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		Doe Jones Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change		Luz Andreoula	
Add			910 Randal Blud Naples, FL 34120
Remove			Naples, FL 34120
2) X Change		Dr. Michael H.	
<u></u> ⊁ ∧dd		Kontos	15470
Remove			Cedarwood Lane
3) Change			Naples, FL 34110
Add			unit # 201
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			With mile fights acres
Remove			

(attach additional sheets, if nece	nal Articles, ente ssary). (Be spec	cific)			
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The date of each amendment(s) adoption:	, if other than the
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 April 9. 2014	
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)	
George Mountraki	
(Typed or printed name of person signing)	
(Title of person signing)	