N9600006271

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
. (Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
•	•	•
(Do	ocument Number)	
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SECRUTARY OF STATE
TALLAHASSEE, FLORID;

Amend

TE

AUG 3 1 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ration: <i>THE COLO</i>	NY AT PELICAN	LANDING FOUNDA
DOCUMENT NUM	ber: <u>N96 00000</u>	6271	·
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Stephanie (Name of	Garcia Contact Person)	
	CASTLE MA	WAGEMENT (Company)	-
	12270 SW	3rd St, #200 Address))
	9 ANTATION (City/ Sta	U FZ 3332: te and Zip Code)	5
	S GARCIA @ E-mail address: (to be use	CASTLE GROWN d for future annual report notific	O. COM ation)
For further information	on concerning this matter, pleas	e call:	
Stepha	nie Garcia	at (<u>954</u>) <u>792 -</u> (Area Code & Dayti	6000 ext 860
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	at of State:
\$35 Filing Fee	☐ \$43.75 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

Articles of Amendment to



Articles of Incor	poration	AHARA OF CO. S. S.
~		TON, INC.
THE COLONY AT PELICAN LAN	IDING FOUNDAT	TON, INC. CAID,
(Name of Corporation as currently filed wi	th the Florida Dept. of Sta	<u>ite</u>)
N94 00000 427		
(Document Number of Corpo	ration (if known)	,
Pursuant to the provisions of section 617.1006, Florida Statu the following amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For P</i>	rofit Corporation adopts
A. If amending name, enter the new name of the corpora	tion:	
The new name must be distinguishable and contain the wo abbreviation "Corp." or "Inc." <u>"Company" or "Co." may</u>		orporated" or the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	·)	MANAGEHENT
	12270 SW3	ST, #200
	PLANTATION	J, FL 33325
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Go CASTLE	E MANAGE MENT
	POBOX 559	7009
	Ft. LAUDER	ZAME, FL 33355
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office:		er the name of the
Name of New Registered Agent:		_
New Registered Office Address: (FI	orida street address)	_
		_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	

I hereby 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) Title Name Address **Type of Action** _ 🔲 Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption:				
	(date of adoption is required)			
Effective date <u>if applicable</u> :	(no move than 00 days after amondment file date)			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.			
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.			
DatedSignature	8.16.10 Parl St			
(By th have r	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)			
<u>-</u>	PAR GRADOS			
	(Typed or printed name of person signing)			
_	Frandas			
	(Title of person signing)			

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