N99000007659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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amend

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2010 JUL 14 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 7/14/10

* 00789, 00547, 00671

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sherwood IV, INC.

DOCUMENT NUMBER: N99000007659

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patrick Fitzmorris
(Name of Contact Person)

Property Managment Plus LLC
(Firm/ Company)

410 Robin Hood Cr #202
(Address)

Naples FL 34104
(City/ State and Zip Code)

PatrickFitzmorris @ comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick at (239) 682 8069
(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

☐ $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)

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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2010

Patrick Fitzmorris
Proeprty Management Plus LLC
410 Robin Hood Cr #202
Naples, FL 34104

SUBJECT: SHERWOOD IV, INC.
Ref. Number: N99000007659

We have received your document for SHERWOOD IV, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 510A00016298

RECEIVED
2010 JUL 14 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED
2018 JUL 14 PM 03:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sherwood IV, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N99000007659
(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this ***Florida Not For Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." **"Company" or "Co." may not be used in the name**.*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

_____

_____

_____

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

_____

_____

_____

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

_____
New Registered Office Address: *(Florida 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
P	William Jones	480 Robin Hood Cr #202 Naples FL 34104	☐ Add ☒ Remove
VP	Jeannine Ensminger	490 Robin Hood Cr #101 Naples FL 34104	☐ Add ☒ Remove
ST	Leslie Lilien	450 Robin Hood Cr #101 Naples FL 34104	☐ Add ☒ Remove

See Attached For "ADDED" Officers.

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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
P	Marilyn Van Note	450 Robin Hood cr #102 Naples FL 34104	☒ Add ☐ Remove
VP	Richard Lilien	450 Robin Hood cr #101 Naples FL 34104	☒ Add ☐ Remove
ST	Carla Borstel	460 Robin Hood cr # 202 Naples FL 34104	☒ Add ☐ 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: 3-8-10
(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.

Dated 6-1-2010

Signature Carla R. Borstel
(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)

Carla R. Borstel
(Typed or printed name of person signing)

Secretary-Treasurer
(Title of person signing)