P00000047226

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Amend C.COULLIETTE

MAY 0 5 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: P0000004772 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

(Name of Corporation as currently	filed with the Flor	rida Dept. of State)	•	
(Document Number	+7226 of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006, F amendment(s) to its Articles of Incorporation:	lorida Statutes, this	Florida Profit Con	rporation adopts the fo	ollowing
A. If amending name, enter the new name of the	corporation:			
name must be distinguishable and contain the				he
abbreviation "Corp.," "Inc.," or Co.," or the des name must contain the word "chartered," "profess				on
B. Enter new principal office address, if applica	ble:		SEE 30	
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)		APR.	FAULT.
			30 30 4881	دسین چهمورس
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i></i> <i>BOX</i>)		E, FLO	
, , , , , , , , , , , , , , , , , , , ,			E E	
D. If amending the registered agent and/or registered agent and/or the new registered		ss in Florida, enter	the name of the	
Name of New Registered Agent:				
New Registered Office Address:	(Florida stre	et address)		
		······································	Florida	
	(City)	(Zip C	Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		th and accept the ob	ligations of the position	1.
Signa	ature of New Registe	ered Agent, if chang	ing	

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)

<u>Title</u>	Name	Address	Type of Action
1	Gina Kacioppi	1930 Golden Gate 1 Naples Fl 34116	Add Remove
<u>T</u>	Gary Muzzonigo	4130 Golden Cate of Naples 93411	Luy 🖸 Add Remove
(attach a	dditional sheets, if necessary). (Be spec	njic)	
<u>provisi</u>	mendment provides for an exchange, re ons for implementing the amendment if not applicable, indicate N/A)	classification, or cancellation of not contained in the amendmen	issued shares, t itself:

The date of each amendment((s) adoption: $4/27/10$
Effective date if applicable:	(date of adoption is required)
Effective date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	4/27/10
selec	a director, president or officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)