Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000149888 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SALVATORI & WOOD, BUCKEL, PL

Account Number : I20030000112 : (239)552-4100 Phone

: (239)649-1706 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN ACROSSLAND FINANCIAL, INC.

	<u> </u>
Certificate of Status	0
Certified Copy	1
Page Count	967
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

JUN - 7 2012

T. BROWN

6/6/2012

No. 8366 P. 3

COVER LETTER

Division of Corporations	
NAME OF CORPORATION: ACTO	sLand Financial, Inc.
DOCUMENT NUMBER: P01000	
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerni	g this matter to the following:
C. Lane W	od, Esq.
	Name of Contact Person
Salvatori, V	ood & Buckel, P.L.
	Firm/ Company
9132 Strad	a Place, Fourth Floor
	Address
Naples, FL	34108
	City/ State and Zip Code
scs@swbnaple	s.com
-	(to be used for future annual report notification)
For further information concerning this m	ter, please call:
C. Lane Wood	at (239) 552-4100 Area Code & Daytime Telephone Number
Name of Contact Person	Area Codo & Daytime Telephone Number
Enclosed is a check for the following amo	ont made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐\$43.75 Filin Certificate o	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301





June 6, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ACROSSLAND FINANCIAL, INC. 4717 TAHITI DRIVE BONITA SPRINGS, FL 34134

SUBJECT: ACROSSLAND FINANCIAL, INC.

REF: P01000100229

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption of each amendment must be included in the document.

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) 245-6050.

Teresa Brown Regulatory Specialist II FAX Aud. #: H12000149888 Letter Number: 512A00016101



•						
Jun. 7.	2012	7:06AM SA	ALVATORI & WOOD (((H12 000 1	49888 3)))	No. 8366	P. 4
			Articles of A	niendment .		12 JUN
			to Articles of Inc	orporation		
_		_,	of	•		1
Across		Financial, II				-
			s currently filed with the F	lorida Dept. of State)		
P01000	01002	<u> </u>			·····	
		(Docume	nt Number of Corporation (i	f known)		
its Articles o	of Incorpo	eration:	ame of the cornoration:	Florida Profit Corporation adopts the fo	The	neif
"Corp.," "I	nc., " or	Co.," or the design		Co". A professional corporation name	must contain	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>						
, a v v v cap in c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, was <u>proqr </u>	·	Naples, FL 34109		
C. <u>Enter n</u> (Mailing	ew maili address	ng address, i l a ppl MAY BE A POST	icable: OFFICE BOX)	6781 Sable Ridge Lar	ie	
		.,		Naples, FL 34109		
			nd/or registered office nddi w registered office address	ess in Florida, onter the name of the		
Name of New Registered Agent		Salvatori, Wood	& Buckel, P.L.			
<u>nu</u>	<u>ivame oj ivew Kegisterea Agent</u>		9132 Strada Pla	ice, Fourth Floor		
				eet address)		

New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w I am familiar with and acfapt the obligations of the position.

New Registered Office Address:

Naples

Signature of New Registered Agent, if changing

(City)

Page 1 of 4

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:	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Ađđ	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name ,	<u>Addres</u> s
1) Change Add Remove	ST	Denise Clark-Carroli	Naples, Pt 34110
2) Change Add Remove	PSTD	Thomas Gaprio	6781 Sable Ridge Lane Naples, FL 34109
3) Change Add Remove			
4) Change Add Remove		_	
5) Change Add Remove		_	
6) Change Add Remove		<u> </u>	

Page 2 of 4

,	(Be specific)
į.	
If an amendment provides for an exch- provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment liself:
provisions for implementing the amei	ange, reclassification, or cancellation of issued shares, udment if not contained in the amendment liself:
provisions for implementing the amei	ange, reclassification, or cancellation of issued shares, udment if not contained in the amendment liself:
provisions for implementing the amei	nnge, reclassification, or cancellation of issued shares, adment if not contained in the amendment liself:
provisions for implementing the amei	nnge, reclassification, or cancellation of issued shares, adment if not contained in the amendment liself:
provisions for implementing the amei	ndment if not contained in the amendment liself:

The date of each amondment(s) adoption: 6/5/12
Effective date (Lupplienble: (no more than 90 days after amendment file date)
Adoption of Ameridment(s) (CI)ECK ONE)
The amendment(s) was were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was were sufficient for approved.
The amendment(s) wastwere approved by the thereholders through voling groups. The following statement must be separately provided for such voting group entitled to yote separately on the amendment(s):
"The number of votes cost for the emendment(s) was/wore sufficient for approval
by
(voiling group)
The amendment(s) was/were adapted by the board of directors without shareholder action and shareholder action was not required.
The amandment(s) was/were adopted by the incorporators without shareholder section and shareholder section was not required.
Dated 06. 05. 12
Signature
(By a director, president or other officer of affects have not been selected, by an incorporator — it in the hands of a recoiver, trusted, or other court appointed Aductory by that Aductory)
Thomas Caprio
(Typed or printed nome of powers signing)
President
(Title of person signing)