

SEP 9 2010 4:20 PM WNF LAW P.L. NO. 997 Pg. 1 of 1  
**FD2000118165**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Re-fax see correction  
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((H10000195991 3)))



H100001959913ABC2

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To: Division of Corporations  
Fax Number : (850) 617-6380

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Account Number : I20090000040  
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TALLAHASSEE, FLORIDA

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Email Address: JLP@WNFLaw.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ISLAVISTA PROPERTIES INC.**

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SEP. 9. 2010 4:20PM

WNF LAW, P. L.

(((FNO. 997)195P. 33)))

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ISLAVISTA PROPERTIES, INC.

**DOCUMENT NUMBER:** P02000118165

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

Please return all correspondence concerning this matter to the following:

Jacqueline C. Portal

Name of Contact Person

WNF LAW, PL

Firm/ Company

201 South Biscayne Blvd., 34th Floor - Miami Center

Address

Miami, Florida 33131

City/ State and Zip Code

JP@WNFLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline C. Portal

Name of Contact Person

at ( 305 )

760-8507

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

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WNF LAW, P. L. : 28:00 AM PAGE 1/001 Fax NO. 997 P. 2



September 9, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

ISLAVISTA PROPERTIES INC.  
201 SOUTH BISCAYNE BLVD.  
34TH FLOOR - MIAMI CENTER  
MIAMI, FL 33131

SUBJECT: ISLAVISTA PROPERTIES INC.  
REF: P02000118165

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 current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6916.

Carol Mustain  
Regulatory Specialist II

FAX Aud. #: H10000195991  
Letter Number: 710A00021483

RECEIVED  
2010 SEP -9 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

SEP. 9. 2010 4:20PM

WNF LAW, P. L.

((NO. 9970195 P. 43)))

Articles of Amendment  
to  
Articles of Incorporation  
of

**ISLAVISTA PROPERTIES INC.**

(Name of Corporation as currently filed with the Florida Dept. of State)

**P02000118165**

(Document Number of Corporation (if known))

FILED  
2010 SEP -9 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**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)

\_\_\_\_\_

(City)

Florida

(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*

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**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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>Cecilia Fakhoury</u>	<u>201 South Biscayne Blvd.</u> <u>34th Floor - Miami Center</u> <u>Miami, Florida 33131</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

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(((H NO. 997195Sp. 6)))

The date of each amendment(s) adoption: September 1, 2010

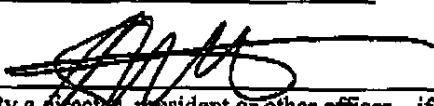
Effective date if applicable: September 1, 2010  
(date of adoption is required)  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
- "The number of votes cast for the amendment(s) was/were sufficient for approval
- by \_\_\_\_\_."
- (voting group)
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated September 1, 2010

Signature

  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Steve L. Waserstein

(Typed or printed name of person signing)

Director

(Title of person signing)