

PD3000079043

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DIVISION OF CORPORATIONS
09 AUG 31 PM 3:40

T Roberts SEP 02 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MAGNOLIA MANAGEMENT COMPANY, INC

DOCUMENT NUMBER: P03000079043

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

Please return all correspondence concerning this matter to the following:

GREGORY B. WILHELM, ESQ

Name of Contact Person

GULF COAST LAW CENTER, PLLC

Firm/ Company

7552 NAVARRE PKWY, SUITE 9

Address

NAVARRE, FL 32566

City/ State and Zip Code

GULFCOASTLAWCENTER@GMAIL.COM

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

For further information concerning this matter, please call:

GREGORY B. WILHELM, ESQ

Name of Contact Person

at (850)

939-0590

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

Articles of Amendment
to
Articles of Incorporation
of

MAGNOLIA MANAGEMENT COMPANY, INC.

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

P03000079043

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG 31 PM 3:40

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)

3749-D GULF BREEZE PKWY

SUITE 139

GULF BREEZE, FL 32561

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:

GULF COAST LAW CENTER, PLLC

7552 NAVARRE PKWY SUITE 9

New Registered Office Address:

(Florida street address)

NAVARRE

(City)

Florida 32566

(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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------|---|--|
| PRESIDENT | DORIS LONG | 3749-D GULF BREEZE PKWY SUITE 139 GULF BREEZE, FL 32566 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MS | PAMELA L. LONG | 4390 GULF BREEZE PKWY GULF BREEZE, FL 32561 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| | | | <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)

RECLASSIFICATION: AS OF AUGUST 21, 2009, DORIS LONG, A MINORITY
 SHARE HOLDER, PURCHASED ALL REMAINING SHARES FROM PAMELA LONG
 FOR A SUM OF \$98.00 (NINETY EIGHT DOLLARS). THEREFORE, DORIS LONG
 BECOMES OWNER OF ALL 100 SHARES OF MAGNOLIA MANAGEMENT COMPANY
 INC.

The date of each amendment(s) adoption: AUGUST 21, 2009

Effective date if applicable: AUGUST 21, 2009
(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

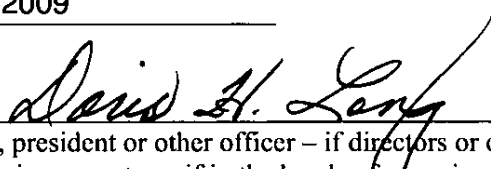
by _____."
(voting group)

☐ 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 21 AUGUST 2009

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)

DORIS LONG

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)