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.

**Electronic Filing Cover Sheet** 

(((H12000176684 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : THE ROBBINS LAW FIRM PA

Account Number: 120060000025

: (727)822-8696

Fax Number

: (727)471-0616

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

Email	Address			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN ARCHER BAY, P.A.

Certificate of Status	0
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Corporate Filing Menu

Help

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JUL 0 9 2012

P.O. Box 6327

Tallahassee, FL 32314

To: Annette Ramsey

Page: 4/9

Date: 7/9/2012 11:09:13 AM

		<b>COVER LETTER</b>		1 1 #
TO: Amendment Sec Division of Corp	· · · · ·		H/20001	17668
NAME OF CORPO	RATION: Archer Bay	/, P.A		
DOCUMENT NUM	BER: P0400007207	72		•
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		·
Please return all corre	spondence concerning this me	atter to the following:		
	JOYCE E. LORD	. PARALEGAL		
		Name of Contact Perso	n ·	-
	ARCHER BAY, F	P.A.		
		Firm/ Company	<del></del>	-
	2639 DR. MLK J	R. STREET NOI	RTH	
	ST. PETERSBU	Address RG, FL 33704		•
		City/ State and Zip Cod	e	
JL	ORD@FLORIDAL	AWYER.COM		
		sed for future annual report	notification)	
For further informatic	on concerning this matter, pleas	se call:		
JOYCE E. L	ORD	<sub>et.(</sub> 727	822-8696 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Tolophone Numbe	r
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	arteneral of State:	
S35 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)	
Am	iling Address endment Section ision of Corporations	Amend	Address Iment Section on of Corporations	

H12000176684 3

Clifton Building 2661 Executive Center Circle

Taliahassec, FL 32301

	#	12000176	6843	
i i	/ / Articles of Am			
	to			
	Articles of Income	rporatiosi		
ARCHER BAY, P.A.				
(Name of Corporation as curr	ently filed with the Flo	rida Dept. of State)		
P04000072072				
(Document Nu	mber of Corporation (if)	(nown)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this F	lorida Profit Corporation ac	dopts the following amendme	nt(s) to
A. If amending name, onter the new name o	f the corporation:			
			The wave	
word "chartered," "professional association," B. <u>Enter new principal office address, if an</u> (Principal office address <u>MUST BE A STREE</u>	nlicabler			
C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFF)</u>		· · · · · · · · · · · · · · · · · · ·	2012 JUL -9 PH	i i
D. If amending the registered agent and/or new registered agent and/or the new registered agent agent and/or the new registered agent agen	registered office addre istered office address:	s in Florida, enter the pan	7.00	
Name of New Registered Agent			. <b>*</b>	
<u></u>	/ (Florida stres	t address)		
No a Bassacca Loron and Co.	id fore smill ost DO	•		
New Registered Office Address:	(City)	Florida,	(Zip Code)	
	(=,)		, og ome	

From: GFI FaxMaker

To: Annette Ramsey

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Date: 7/9/2012 11:09:14 AM

Signature of New Registered Agent, if changing

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.

From: GFI FaxMaker

To: Annette Ramsey

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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)

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 Solly Smith, SV as an Add.

Example:		<del>-</del>	
X_Change	<u>PT</u>	<u>Inha Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add XXX Remove	D	EDMUNDJ GEGAN	2639 DR. MLK JR. STREET NORTH ST. PETERSBURG, PL 99704
2) Change Add Remove	<del> </del>	<u> </u>	
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		<u> </u>	
6) Change Add Remove			

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From: GFI FaxMaker

To: Annette Ramsey

Page: 7/9

Date: 7/9/2012 11:09:14 AM

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tach additional sheet	ndditional Artics, if necessary).	(Be specific	<b>;</b> )			
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ın amendment pro	vides for an excl	innge, reclass	sification, or o	ancellation .	of issued sha	1'03,
ovisions for implem	menting the ame	ndment if no	t contained in	the amondr	<u>jent itself:</u>	
Cifnet annihamble	, municute NA)					
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From: GFI FaxMake	r To: Annette Ramsey	Page: 8/9	Date: 7/9/2012 11:09:14 AM
· ;	0.0	1/20	00/766843
The date of each amendment(s) adqu	rdon: Filly	6120	100-
Effective date if applicable:	2016 6 2	012	
ettective date it approxime.	(no more than 90	days after amon	dmont file date)
•	V		·
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopt by the sharebolders was/were suffi		umber of votes	cast for the amendment(s)
☐ The amendment(s) was/were appro- must be separately provided for ea	ved by the shareholders through voting group entitled to ve	gh voting group ate separately or	s. The following statement the amendment(s):
"The number of votes cast for	the amendment(s) was/were	sufficient for ap	į svorg
by			·
	(voting group)		
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors w	dthout sharehold	der action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators withou	ut shareholder a	ction and shareholder
Dated July 6, 2	2012		
Signatupe C	CONS		
selephed,	ctor, president or other office by an incorporator — if in the I fiduciary by that fiduciary)	r - if directors of hands of a recei	er officers have not been war, mustee, or other court
C	Christopher Robbi	ns	
<del></del>	(Typed or printed na	ame of person si	gning)
F	President		

Page 4 of 4

(Title of person signing)