## P05000039843

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

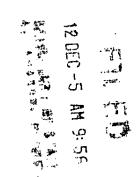
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Aprend. 12-5-12 DC

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporations
NAME OF CORPORATION: Reflection Pous of South FLOKIDA INC DOCUMENT NUMBER: # P05000039843
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Constance M Pridger  Name of Contact Person  Reflection rous of South Florida WC  Firm/Rompany P.O. Box 9013  Address  Address  City/ State and Zip Code  Wadio @ Comast. net  E-mail address-(to be used for future annual report notification)
For further information concerning this matter, please call:  Anstance Priciped at (712) 462033
Name of Contact Person at (72) 46-2033  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S\$35 Filing Fee S\$43.75 Filing Fee & S\$2.50 Filing Fee Certificate of Status  Certified Copy Certificate of Status  (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Taliahassee, FL 32301

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Articles of An	nendment
to Articles of Inco	orporation
Articles of figure	n por a mon
Reflection Pools of South Flor	ida. INC.
(Name of Corporation as currently filed with the F	orida Dept. of State)
4 Pa50000039843	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "word "chartered," "professional association," or the abbreviation ".	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	POBOX 9013 Port St Lucie FL 34985-9013
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent Constance	4 Pringen
New Registered Office Address: Port St. Luc. (City)	<u>Maxius St</u> <u>seel address)</u> 1 <u>C</u> , Florida 3/952  (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	Agen of 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)

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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P David W Pridger	2337 SE Marius St Part St Cucie Fl 34952
Add	,	Part St Lucie FL 34952
Remove		
2)Change	P Constance M Pridges	2337 SK Marius St Port St Lucie, FC 34952
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Rémove		
<del></del> <u></u>		
6) Change		
Add		
Remove		

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he date of each amendment(s) ad	doption: 11/1/20/2	
ffective date if applicable: 1/1/1	model Le	
	(no more than 90 day	s after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The num	ber of votes cast for the amendment(s)
	proved by the shareholders through each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were suf	ficient for approval
by	(voting group)	.,,,
	(voting group)	
action was not required.	opted by the board of directors with opted by the incorporators without	out shareholder action and shareholder
Dated_1 <u>D</u> /5	/12	
Signature	restance M/S	dee
selecte	firector, president or other officer – ed, by an incorporator – if in the hau nted fiduciary by that fiduciary)	it directors or officers have not been has of a receiver, trustee, or other court
77-1	Constance M	PridgeN
	(Typed or printed name	e of person signing)
	(Title of person sign	A:_A\