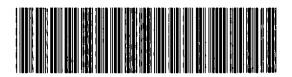
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(Re	questor's Name)	
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Certified Copies	Certificates	s of Status
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Ameno C.COULLIETTE

JUL 21 2010

**EXAMINER** 

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION:	SIESTA ISLES II INC	<u> </u>				
DOCUMENT NU	MBER:	202560977					
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.					
Please return all co	orrespondence concerning th	is matter to the following:					
•	BRUCE ROBERTSON						
			<del> </del>				
•							
The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  BRUCE ROBERTSON  Name of Contact Person  Firm/ Company  16871 SAN CARLOS BLVD  Address  FORT MYERS FL 33908  City/ State and Zip Code  BRPBFL@GMAIL COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  BRUCE D ROBERTSON  Name of Contact Person  Area Code & Daytime Telephone Number  Enclosed is a check for the following amount made payable to the Florida Department of State:  \$\Begin{align*} \Precequipment{Certificate of Status} \Rightarrow  \q							
•							
	1687 <sup>-</sup>	1 SAN CARLOS BLVD	,				
	1007	······································	<del> </del>				
	FOF	RT MYERS EL 33908					
	<del> </del>		<del> </del>				
•	•	•	•				
<u>.,                                    </u>	BRPB	FL@GMAIL.COM	· · · · · · · · · · · · · · · · · · ·				
	E-mail address; (to be use	ed for future annual report notification)					
For further information	ation concerning this matter,	please call:					
BRUG	CE D ROBERTSON	at ( 239 ) 8	378-7755				
Name	of Contact Person		elephone Number				
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	rtment of State:				
☑ \$35 Filing Fee		Certified Copy	Certificate of Status				
Mailing A	ddress	Street Address	•				
Amendmer		Amendment Section	,				
	Corporations	Division of Corporations					
P.O. Box 6		Clifton Building 2661 Executive Center Circ	J.				
Lahanassee	e. FL 32314	Zoo i Executive Center Circ	ie.				

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

### SIESTA ISLES II INC (Name of Corporation as currently filed with the Florida Dept. of State)

Pac	5000 D47	1898			
(Document Numb	er of Corporat	ion (if known	)	<del></del>	
Pursuant to the provisions of section 607.1006, mendment(s) to its Articles of Incorporation:	Florida Statut	les, this <i>Flori</i>	da Profit Corpor	ration adopts th	e followi
A. If amending name, enter the new name of	the corporatio	<u>n:</u>	•		
		6		Tho	new
ame must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the amne must contain the word "chartered," "profes	lesignation "C	orp," "Inc,"	or "Co". A prof	fessional corpor	
Enter new principal office address, if appli	cable:				
Principal office address <u>MUST BE A STREET</u>	ADDRESS)				
				<u>5</u> %	
		·	3		
	•	is.	:	全部 鱼	***************************************
<ul> <li>Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC</li> </ul>	E PAV				TIF €
Muning dutress MAT BE A TOST OF TIC.	E BUA)	<del> </del>			Printer.
		·			
. If amending the registered agent and/or re	gistered office	address in F	lorida, enter the	name of the	
new registered agent and/or the new regist			٠.		
Name of New Registered Agent:					
Trans of the Ategratic da 11gem.			<u> </u>		
New Registered Office Address:	(Flori	ida street addi	ress)		
	(2.70)				
· -	· (Cit.)	<del></del>	, Flor (Zip Code		-
	(City)	•	(Zip Code,	,	
ew Registered Agent's Signature, if changing					
hereby accept the appointment as registered ag	ent. I am fami	iliar with and	accept the obliga	tions of the posi	tion.
Sis	nature of New	Registered A	gent, 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> </u>	<u>Name</u>	Address	Type of Action
VP	GUERRERO ANA M	5826 WHITING DR FORT MYERS FL 33908	☐ Add ☐ Remove
	·		Add Remove
	***************************************		D Damesus
E. If amend (attach ad	ling or adding additional Articles, en Iditional sheets, if necessary). (Be sp	ter change(s) here: pecific)	, ;
•	•	<u> </u>	,
-		-	
provisio	nendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)	reclassification, or cancellation if not contained in the amendr	of issued shares, nent itself:
		· · · · · · · · · · · · · · · · · · ·	
			1

The date of each amendme	ent(s) adoption: MA	Y 10 2010		· •	<u></u> '
્રું Effective date <u>if applicable</u>	NAN/ 40 0040	(date of adop	tion is required)		
Maria Maria	(no more than 9	0 days after ame	endment file date	) · .	•
Adoption of Amendment(s	) (СН	ECK ONE)			
The amendment(s) was/v by the shareholders was/			he number of vo	ites cast for the amend	lment(s
The amendment(s) was/v	ided for each voting	group entitled t	o vote separately	on the amendment(s)	
"The number of vot	es cast for the amend	iment(s) was/we	ere sufficient for	approval	
. * by	(voting group)				
	(10m/66,0mp)		•	,	
The amendment(s) was/vaction was not required.	were adopted by the	incorporators w	ithout sharehold	er action and sharehol	der .
46	**				
Dated M/	AY 10 2010		<del>-</del>		
Signature	BL				
So		orator – if in th	e hands of a rece	or officers have not b viver, trustee, or other	
		BRUCE D F	ROBERTSON		
要な。 で 、 、 も	(Тур	<del> </del>	ame of person sig	gning)	
			SIDENT		
	(Title of	person signing	)	•	