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.

(((H16000312253 3)))



H160003122533ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : THE NYE-SCHMITZ LAW FIRM, P.A.

Account Number : I20150000128 Phone

: (239)210-5088

Fax Number

: (239)300-9941

DEC 22 2016

I ALBRITTON

77

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

Rmail	Address:		

#### COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTHWEST FLORIDA INVEST, INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

### (((H16000312253 3)))

Articles of Amendment

	Articles of I	n ncorpor <del>ation</del> of	
SOUTHWEST FLORIDA INVEST, IN	c.		
(Name :	of Cornoration as correr	the filed with the Florida Dept. of State)	7.4. 200
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the folk	owing amendme
A. If amending name, enter the new no	ime of the cornoration:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ution "Corp," "inc," or	ion," "company," or "incorporated" or ii "Co". A professional corporation name n "P.A."	The new he abbreviation nust contain the
B. Enter new principal office address.		3447 Pine Ridge Road, Suite 101	
(Principal office eddress <u>MUST BE A STREET ADDRESS</u> )		Naples, FL 34109	<del></del>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST		3447 Pine Ridge Road, Suite 101	
		Naples, FL 34109	
D. If smendim the recistered anent an new registered agent and/or the new Name of Nave Registered Agent	d/or registered office ad r registered office addre The Nye-Schmitz Law F		
	3447 Pine Ridge Road,	Suite 101	
	(Florida i	street address)	
New Registered Office Address:	Naples		09
		(City)	(Zip Code)
New Registered Agent's Signature. He I hereby accept the appointment as regist	hanning Registered Acco	rit: rwith and accept the obligations of the positi	ion.
	S. Max - S Signature of New	Registered Agent, if changing	

Page 1 of 4

(((H16000312253 3)))

#### (((H16000312253 3)))

If smeading 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:

PT	John Doe	
<u>y</u>	Mike Jones	
<u>sv</u>	Salty Smith	
Title	Name	Address
P	SSI ACCOUNTING AND TAX SER	1342 COLONIAL BLVD STE D 2
		FORT MYERS, FL 33907
DP	Sebastian Nyo-Schmitz	3447 Pine Ridge Road, Suite 101
		Naples, FL 34109
		·
	·	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
		, , , , , , , , , , , , , , , , , , ,
	Y SV Title P	Y Mike Jones  SY Salty Smith  Title Name  P SSI ACCOUNTING AND TAX SER

Page 2 of 4

(((H16000312253 3)))

## $(((H16000312253\ 3)))$

( <u>amending or adding additional Ar</u> Attach <i>additional sheets, if necessary</i> ).	(Be specific)
•	
·····	
	- <del> </del>
f an amendment provides for an ex- provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued thares, endpassed if pot contained in the amendment itself:
······································	

Page 3 of 4

**43.** . . .

# (((H16000312253 3)))

	December 1, 2016	
The date of each amendment date this document was signed	1,7 6	, if other than the
	Tuesday, December 20, 2016	
Effective date <u>if amplicable</u> :	(no mare than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the smendment(s) ere sufficient for approval.	
• •	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
The number of vote	cast for the amendment(s) was/were sufficient for approval	
· by		
	(Noting group)	,
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Tues Dated	day, December 20, 2016	
Signature	S. She-Elm'E	
	By a director, president or other officer - if directors or officers have not been	<del></del>
	slected, by an incorporator — if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Sebestian Nye-Schmitz	
	(Typed or printed name of person signing)	
	Director & President	
	(Title of person signing)	<del></del>