

P06000088563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/18/07--01019--003 **35.00

FILED

07 MAR 26 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amended
3-26-07*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TROPICAL LIVING REALTY

DOCUMENT NUMBER: P06000088563

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

Please return all correspondence concerning this matter to the following:

MARIA RAMOS

(Name of Contact Person)

TROPICAL LIVING REALTY

(Firm/ Company)

10035 W HILLSBOROUGH AVE

(Address)

TAMPA FL 33615

(City/ State and Zip Code)

For further information concerning this matter, please call:

MARIA RAMOS

(Name of Contact Person)

at (813) 884-0500

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 22, 2007

MARIA RAMOS
10035 W HILLSBOROUGH AVE
TAMPA, FL 33615

SUBJECT: TROPICAL LIVING REALTY CO.
Ref. Number: P06000088563

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

Our records indicate the correct name of your entity is as it appears on the enclosed computer printout. If you wish to amend your name, please see the enclosed information for fees and instructions. Otherwise, the name must be corrected throughout your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 607A00004912



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2007

MARIA RAMOS
10035 W HILLSBOROUGH AVE
TAMPA, FL 33615

SUBJECT: TROPICAL LIVING REALTY CO.
Ref. Number: P06000088563

We have received your document for TROPICAL LIVING REALTY CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 107A00009739

RECEIVED
07 FEB 19 AM 8:00
DIVISION OF CORPORATIONS

This letter is being sent to you by first class mail. If you do not receive it, please contact the Division of Corporations at (850) 245-6916.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2007

MARIA RAMOS
10035 W HILLSBOROUGH AVE
TAMPA, FL 33615

SUBJECT: TROPICAL LIVING REALTY CO.
Ref. Number: P06000088563

We have received your document for TROPICAL LIVING REALTY CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 107A00009739

*They
have it like a whole
comp.*

No
789
00169
00348
671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 26, 2007

MARIA RAMOS
10035 W HILLSBOROUGH AVE
TAMPA, FL 33615

SUBJECT: TROPICAL LIVING REALTY CO.
Ref. Number: P06000088563

We have received your document for TROPICAL LIVING REALTY CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The corporate suffix must be added to the corporate name throughout the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 107A00013869



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2007

MARIA RAMOS
10035 W HILLSBOROUGH AVE
TAMPA, FL 33615

SUBJECT: TROPICAL LIVING REALTY CO.
Ref. Number: P06000088563

This is how they have new name

" Tropical Living Realty & Co."

*Karen said do
they must also have
suffix*

We have received your document for TROPICAL LIVING REALTY CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The corporate suffix must be added to the corporate name throughout the application.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 007A00016960

Articles of Amendment
to
Articles of Incorporation
of

FILED
07 MAR 26 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TROPICAL LIVING REALTY CO

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

P06000088563

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

TROPICAL LIVING REALTY & CO.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

MARIA I RAMOS -PRESIDENT - ADDED

MELVIN RICHMAN - OFFICER - DELETED

(Attach additional pages if necessary)

If an amendment provides for 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)

N/A

(continued)

The date of each amendment(s) adoption: 10-25-2006

Effective date if applicable: _____
(no more than 90 days after amendment file date)

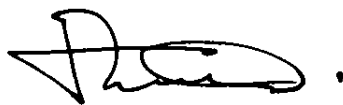
Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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.

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)

JOAQUIN RAMOS

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

FILING FEE: \$35