P06000147482

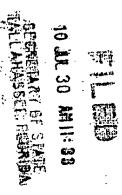
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Certified Copies	Certificates	of Status
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Amend C.COULLIETTE

JUL 3 0 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 21, 2010

SUMMIT POOLS 6013 S. SUNCOAST BLVD HOMOSASSA, FL 34446

SUBJECT: SUMMIT POOL OF FLA., INC.

Ref. Number: P06000147482

SECRETARY OF STAT

We have received your document for SUMMIT POOL OF FLA., INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We only received a signature page for an amendment filing which I assume is for Summit Pool of Fla., Inc. which is the name and address that was on the envelope we received. If you are trying to amend this corporation, you will need to file a completed application, not just the last page. On the page we got from you, the date of adoption was not included on the top line of the form.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 010A00017614

हरू है कि के के किया है। इस के लिए किए किए हैं कि के किया है के किया है। उस के लिए हैं किया है ने हुं के के कुर्तिकृषि हो। इस्कुर्किया के इस है लिए हैं किया किया है। उस है है है। उस है किया है

Tallahassee, FL 32314

COVER LETTER

YO: Amendment Section Division of Corporations Summit Pool of FLA, Inc NAME OF CORPORATION: $_$ DOCUMENT NUMBER: P06000147482 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Summit Pool of FLA, INc. Firm/ Company 6013 S Suncoast Blvd Address Homosassa, FL 34448 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dawn Baretela 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: ¥35 Filing Fee ☐ \$43.75 Filing Fee & \$43.75 Filing Fee & ... \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently		he Florida Dept.	of State)			
P06000147482		· .				
(Document Number of	f Corporation	on (if known)				
Pursuant to the provisions of section 607.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida 1</i>	Profit Corporation	adopts	the fol	lowing
A. If amending name, enter the new name of the c	corporation	<u>ı;</u>				
			;	T	he new	,
name must be distinguishable and contain the wabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	nation "Co	orp," "Inc," or "	Co". A profession	porated" mal corp	or the oration	! !
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET AD</u>			1,000	_ <u>#</u>	70	
(Principal office address <u>WOSI BE A STREET AD</u>	<u>Drego</u>)			全部	2	The last
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C. Enter new mailing address, if applicable:	OV)	•		The second	=	
(Mailing address MAY BE A POST OFFICE BO	230				ः ©	EH.
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D. If amending the registered agent and/or registered new registered agent and/or the new registered			la, enter the nam	e of the		
new registeren agent and/or the new registeren	Office and	1 638;				
Name of New Registered Agent:						
New Registered Office Address:	(Florid	la sireet address)				
	· <u>·</u>		, Florida_	<u>.</u>		•
	(City)		(Zip Code)			
New Registered Agent's Signature, if changing Reg	gistered Ag	ent:				
thereby accept the appointment as registered agent.	I am famil	iar with and acce	pt the obligations	of the po	sition.	
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Signatu	ire of New I	Registered Agent,	if changing			

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Annual Control of the
If an amendment provides for an 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)

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7-15-10

No. 3812 P. 3

The date of each amendment(s) adoption: (date of adoption is required) Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted 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 (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. Dated June 30 2010 X 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) <u>Dawn Baretel</u> (Typed or printed name of person signing)