

PO7000122520

(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



400173088144

*Amended*

03/25/10--01009--011 \*\*35.00

2010 MAR 25 PM 4:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*ADR*  
*3/26/10*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LUNARLANDOWNER.COM

DOCUMENT NUMBER: P07000122520

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

Please return all correspondence concerning this matter to the following:

DAVID HIRSCH

Name of Contact Person

HIRSCH AND COMPANY CPAS, INC.

Firm/ Company

175 W. CAMINO REAL

Address

BOCA RATON, FL 33432

City/ State and Zip Code

DAVE@HIRSCHCPAS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID HIRSCH

Name of Contact Person

at ( 561 ) 367-7371

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 &  
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

Articles of Amendment  
to  
Articles of Incorporation  
of

LUNARLANDOWNER.COM , INC.

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

P07000122520

(Document Number of Corporation (if known))

FILED  
2018 MAR 25 PM 4:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

9770 S. MILITARY TRAIL

SUITE B-7 # 357

BOYNTON BEACH, FL 33436

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

9770 S. MILITARY TRAIL

SUITE B-7 # 357

BOYNTON BEACH, FL 33436

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

\_\_\_\_\_, Florida  
(City) (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 Agent, 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>Title</u> | <u>Name</u>         | <u>Address</u>                                                       | <u>Type of Action</u>                                                      |
|--------------|---------------------|----------------------------------------------------------------------|----------------------------------------------------------------------------|
| PT           | JOHN MERRITT        | 22976 OXFORD PLACE<br>UNIT D<br>BOCA RATON, FL 33433                 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| P            | JAMES N DEMESTRE JR | 9770 S. MILITARY TRAIL<br>SUITE B-7 # 357<br>BOYNTON BEACH, FL 33436 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                     |                                                                      | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

---

---

---

---

---

---

---

---

**F. 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)*

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: \_\_\_\_\_

3-1-10

(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

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.

Dated 3/1/2010

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)

JAMES N DEMESTRE JR

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)