

PO800008468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

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(Business Entity Name)

(Document Number)

Certified Copies _____

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000135235350

09/08/08--01007--009 **35.00

FILED

2009 SEP 19 AM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
[Signature]

Thelma
850-245-6897



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2008

ELAINE BROOKS
PROPERTY MANAGEMENT PARTNERS OF ST. JOHN
12058 SAN JOSE BLVD, SUITE 203
JAKSONVILLE, FL 32223

SUBJECT: PROPERTY MANAGEMENT PARTNERS OF ST JOHNS, INC.
Ref. Number: P08000008468

We have received your document for PROPERTY MANAGEMENT PARTNERS OF ST JOHNS, 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):

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 808A00049687

RECEIVED
2008 SEP 22 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Property management Partners
of St. Johns, Inc.

DOCUMENT NUMBER: PO8000008468

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

Please return all correspondence concerning this matter to the following:

Elaine Brooks
(Name of Contact Person)

Property management partners of St. Johns, inc.
(Firm/ Company)

12058 San Jose Blvd. Suite 203
(Address)

Jax, FL 32223
(City/ State and Zip Code)

For further information concerning this matter, please call:

Elaine Brooks at 904-460-2785 office
(Name of Contact Person) (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

Articles of Amendment
to
Articles of Incorporation
of

Property Management Partners of St. Johns, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

PO80000084608
(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):

(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)**

Please Change the following:

① principle address: 12058 San Jose Blvd Suite 203
Jacksonville, Florida 32223

① Registered Agent Address:
12058 San Jose Blvd. Suite 203
Jacksonville, FL 32223

① Officer/Director Detail:

P. Elaine Brooks
PO Box 600033
JAX, FL 32260

VP. Teresa Bowen
PO Box 600033
JAX, FL 32260

(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)

The date of each amendment(s) adoption: 9/2/08

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)

Elaine Brooks

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35