

PD8000035313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

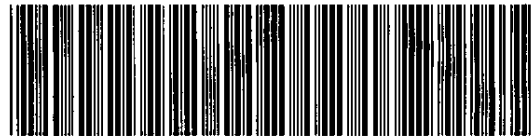
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/27/10--01019--024 **42.75

08/03/10--01001--006 **1.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG -2 PM 3:30


N.C.

C.COULLIETTE

AUG 02 2010

EXAMINER

COVER LETTER

 **TO:** Amendment Section
Division of Corporations

SUBJECT: 3 Palms of Largo, Inc
Name of Corporation

DOCUMENT NUMBER: P08000035313

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra L. Vinnedge
Name of Contact Person

3 Palms of Largo, Inc.
Firm/Company

4613 Barfield Crescent Rd
Address

Murfreesboro, TN 37128
City/State and Zip Code

debi@cogforlife.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra L. Vinnedge at (727) 543-3480
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$35.00 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

July 27, 2010

DEBRA L. VINNEDGE
3 PALMS OF LARGO, INC.
4613 BARFIELD CRESCENT RD
MURFREESBORO, TN 37128

SUBJECT: 3 PALMS OF LARGO, INC.
Ref. Number: P08000035313

We have received your document for 3 PALMS OF LARGO; INC. and check(s) totaling \$42.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$1.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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: 110A00018150

RECEIVED
2010 AUG -2 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 3 PALMS EYE (NEW) 3 PALMS OF LARGO (CURRENT)

DOCUMENT NUMBER: P08000035313 (CURRENT)

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

Please return all correspondence concerning this matter to the following:

DEBRA L. VINNEDGE

Name of Contact Person

3 PALMS EYE

Firm/ Company

4613 BARFIELD CRESCENT RD

Address

MURFREESBORO, TN 37128

City/ State and Zip Code

DEBI@COGFORLIFE.ORG

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

For further information concerning this matter, please call:

DEBRA VINNEDGE

Name of Contact Person

at (727) 543-3480

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

3 PALMS OF LARGO, INC.

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

P08000035313

(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:

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

3 PALMS EYE, INC.

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)

(NO CHANGE)

943 DEVILLE DR E

LARGO FL 33771

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

(NO CHANGE)

4613 BARFIELD CRESCENT RD
MURFREESBORO, TN 37128

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)

(NO CHANGE)

(City)

, Florida
(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

10 AUG -2 PM 3:30

SECRETARY OF
DIVISION OF CORPORATIONS

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>
	(NO CHANGE)		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <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)

N/A

The date of each amendment(s) adoption: JULY 31, 2010 07/31/2010
(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 JULY 31, 2010 07/31/2010

Signature Debra L. Vinnedge
(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)

DEBRA L. VINNEDGE
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)