P09000018107

| (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



600161796516

name Change

10/19/09--01036--016 **35.00

FILED

2009 OCT 19 AMII: 08

SECRETARY OF STATE
ANASSEE SELORID.

Polatos

COVER LETTER

| TO: Amendment Section Division of Corporations | | . * | | | |
|--|---|---|--|--|--|
| NAME OF CORPORATION: PER OF Long Koy CORP | | | | | |
| DOCUMENT NUMBER: P090 000 | 18107 | | | | |
| The enclosed Articles of Amendment and fee a | are submitted for filing. | | | | |
| Please return all correspondence concerning th | is matter to the following: | | | | |
| RICARdo | Perdomo | | | | |
| N | Name of Contact Person | | | | |
| PER of Long Key Clasp Firm/ Company | | | | | |
| _ | Box 1172 | | | | |
| Long / | (ey - FL 3300) | | | | |
| | City/State and Zip Code Ahoo .CO >>>> Ed for future annual report notification) | · | | | |
| For further information concerning this matter, please call: | | | | | |
| RICAR So Persono Name of Contact Person | at (235) 682- | 5606 phone Number | | | |
| Enclosed is a check for the following amount n | nade payable to the Florida Depart | ment of State: | | | |
| \$35 Filing Fee \$\times \text{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 | Street Address | | | | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | Amendment Section | | | |
| P.O. Box 6327 | Clifton Building | | | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | • | | | |

Tallahassee, FL 32301

| | Articles of Am | iendment | E. | 711 |
|---|---------------------|---------------------------------------|-----------------|--|
| • | to | | 1 | FILED |
| | Articles of Inco | rporation | 2000 00 | - 8-2 |
| 2 | of | | COON OC | 19 AMII: 08 |
| PER OF Long Key (| The sont | 04) | SECRET | AIT []: 08 |
| (Name of Corporation as curr | ently filed with t | he Florida I | ent of Sa | teor STate |
| | | | | EEFLORINZ |
| <u> </u> | | | | |
| (Document Nur | nber of Corporation | on (if known | 1) | |
| Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation: | 6, Florida Statute | es, this <i>Flor</i> | ida Profit (| Corporation adopts the following |
| A. If amending name, enter the new name o | f the corneration | •• | | |
| | | <u>1:</u> | | |
| PER OF GRASSY | | P | | The new |
| name must be distinguishable and contain | | | | |
| abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro | | | | |
| name musi contain the word - charterea, - pro | yessionai associa | | | • |
| B. Enter new principal office address, if app | licable: | 50 | 8152 C | Nex seas Hwy FL 33050 |
| (Principal office address <u>MUST BE A STREE</u> | | M | | 51- |
| | | | A MON, | <u>+2 33050</u> |
| | | | | |
| | | | | |
| C. Enter new mailing address, if applicable | <u>*</u> | 20 | 3 | |
| (Mailing address MAY BE A POST OFFI | CE BOX) | <u>r. v</u> | . Dox | <u>//72 </u> |
| | | 100 | - 10- | 11.7.2 y - FL 33001 |
| | | | g Ne | 4-72 33001 |
| | | | | <u> </u> |
| D. If amending the registered agent and/or i | registered office | <u>address in F</u> | lorida, ent | er the name of the |
| new registered agent and/or the new regi | stered office add | ress: | | |
| Name of Nau Pagistured Agents | | | | |
| Name of New Registered Agent: | | | | |
| | | | | |
| New Registered Office Address: | (Florid | da street add | ress) | _ |
| | | | | |
| | (7) | · · · · · · · · · · · · · · · · · · · | (FT) | _, Florida |
| | (City) | | (Zip | Code) |
| New Registered Agent's Signature, if changi | ng Registered Ac | zent: | | |
| I hereby accept the appointment as registered a | gent. I am famil | iar with and | accept the | obligations of the position. |
| | | | · · · · · · · · | <u> </u> |
| | | | | |
| S | ignature of New 1 | Registered A | gent, if chai | nging |

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)

| Title . | Name | Address | Type of Action |
|----------------|---|--|--------------------------|
| √ P_ | Rodeiguez, Pateicia Adaljisa L. Perdono | 159 So. Bahama De Duck Key-FL 33050 | □ Add X Remove |
| 1 | Adalfisa L. Perdono | P. O. BOX 1172 LONG Key-FL 33001 | ⊠ Add □ Remove |
| | | | ☐ Add ☐ Remove |
| | ding or adding additional Articles, entered distinct the spect of the | | |
| | | | |
| <u>provisi</u> | mendment provides for an exchange, recons for implementing the amendment if not applicable, indicate N/A) | | |
| | | | |
| | | | |
| | | | |

| The date of each amendment | (s) adoption: 10/5/09 |
|--|---|
| Effective date <u>if applicable</u> : | (date of adoption is required) |
| Encetive date in applicable. | (no more than 90 days after amendment file date) |
| · · · · · · · · · · · · · · · · · · · | |
| Adoption of Amendment(s) | (CHECK ONE) |
| by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement d 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) |
| | (voting group) |
| The amendment(s) was/well action was not required. | re adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | re adopted by the incorporators without shareholder action and shareholder |
| Dated | 10/5/09 |
| sele | a director, president of other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
| | RICARdo Perdomo |
| | (Typed or printed name of person signing) |
| | TROSIDENT |
| | (Title of person signing) |