

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address	:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN 1931 SW TAURUS LANE, INC

Constitution of Constitution	SECTION OF THE PROPERTY OF SHIP CONTINUES OF
Certificate of Status	U
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

JAN 0 6 2010

EXAMINER

· 1 0 0 0 0 0 0 3 2 1 9 · 3 .
Articles of Amendment

Ai	rticles of Incorpo	ration	j. 15. 14.	
	of 5			
1931 SW	1931 SW TAURUS LANE, INC			
(Name of Corporation as cu	rrently filed with	the Florida Dept. of Sta	10 July 6	
P	209000101975		~	
	umber of Corporat	ion (if known)		
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc.		tes, this Florida Profit	Corporation adopts the	
A. If amending name, enter the new name	e of the corporatio	<u>n:</u>		
The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation no association," or the abbreviation "P.A."	.," "Inc.," or Co.	," or the designation "	Corp, " "Inc," or	
B. Enter new principal office address, if a		6251 N US Highway 1		
(Principal office address MUST BE A STR	<u>EET ADDRESS</u>)	Fort Pierce FL 349	46	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6251 N US Highway 1 Fort Pierce FL 34946		
D. If amending the registered agent and/o new registered agent and/or the new re			er the name of the	
Name of New Registered Agent:	Robert Bering	ghaus	_	
New Registered Office Address:	6251 N US Highway 1 (Florida street address)			
	Fort Pierce	(City)	, Florida 34946 (Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registe position.	red agepti. / 1 am ,	familiar with and accep		
	Signature of New	Registered Agent, if char	nging	

4.10000003219.3

·	iditional sheels, if necessary)		
<u>Title</u>	Name	Address	Type of Action
<u>P</u>	Peter J Hopmayer	570 Ponte Vedra Blvd Ponte Vedra FL 32082	
<u>P</u>	Robert Beringhaus	6251 N US Highway 1 Fort Pierce FL 34946	
E. If amer (attach	nding or adding additional Articles, e additional sheets, if necessary). (Be	enter change(s) here: specific)	
provis	mendment provides for an exchange tions for implementing the amendment to applicable, indicate N/A)		

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Constitut data if amplicables	
Effective date if applicable: (no	nore than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was were sufficient for approval
by	ng group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
selected,	ector, president or other diffeer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court if fiduciary by that fiduciary)
Ro	bert Beringhaus (Typed or printed name of person signing)
<u>Pr</u>	esident
	(Title of person signing)