P10000003719

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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Amendicas nondais

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SWFL FAC	ILITIES MANAC	SEMENT, INC
DOCUMENT NUMB	P100000	03719	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ERNESTO E. VE	LASQUEZ	
•		Name of Contact Persor	1
	SWFL FACILITIES MANAGEMENT, INC		
•		Firm/ Company	
	3270 14TH AVE	NE	
•		Address	
_	NAPLES, FL 341		
		City/ State and Zip Code	
ern	esto.velasquez@	sucasaennaples	.com
	E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, please call: ERNESTO E. VELASQUEZ at (239) 253-2981			
	of Contact Person	at (Area Coo	de & Daytime Telephone Number
	the following amount made p		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	S52.50 Filing Fee Certificate of Status Certified Copy opy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment Articles of Incorporation

of

SWFL FACILITIES MANAGEMENT INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P1000003719
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: A. <u>If amending name, enter the new name of the corporation:</u>
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)

C.	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12 JAN -4
D.	If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	ess in Florida, enter the name of the	PM 3: 50
	(Florida stree	et address)	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(City)

Florida

(Zip Code)

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V, as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> · <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add X Remove	<u>T</u>	LUIS M. VELASQUEZ	3270 14TH AVE NE NAPLES, FL 34120
2) Change Add Remove	<u>T</u>	JUAN C. MONTANE	5463 27TH AVE SW NAPLES, FL 34116
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	ach additional sheets, if necessary). (Be specific)
<u> </u>	
F. <u>lf a</u> <u>pr</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
Sha	res:
	number of shares of the corporation are 100, distribute as follow:
The	
The 70	Ernesto E. Velasquez
70	Ernesto E. Velasquez Luis M. Velasquez
	Ernesto E. Velasquez Luis M. Velasquez Juan C. Montane

The date of each amendment(s) a	doption: January 1st, 2012
Effective date if applicable: Ja	nuary 1st, 2012
Effective date it apprecable.	(no more 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	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} Decen	nber 27th, 2011
Signature	Th
(By a d	lirector, president of other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Ernesto E. Velasquez
	(Typed or printed name of person signing)
	President
	(Title of person signing)