P10000044408

(Req	uestor's Name)	
· (Add	ress)	
(Add	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nai	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

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SECRETARY OF SIAIL DIVISION OF CORPORATIONS

Amend Ma Dodl

COVER LETTER

TO: Amendment Section Division of Corporations

	MANAGEM ER: P1000004440		AS COUNTY INC.
	f Amendment and fee are su	•	
•	condence concerning this ma	J	•
·	_	· ·	
_	LUCILLE GERAF	Name of Contact Person	
		Name of Contact Person	1
· <u>-</u>		Firm/ Company	
-	213 LEEWARD I		
•	CLEARWATER,	Address	
-	OLLAIVVATEIN,	City/ State and Zip Code	<u> </u>
MIC	HAELANDOLING		
10110		sed for future annual report	
For further information	concerning this matter, please		434-1616
	Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	□\$52.50 Filing Fee Certificate of Status Certified Copy opy is enclosed)
Amer Divis P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, 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

MANAGEMENT OF PINELLAS COUNTY INC.

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

g amendment(s) to

P10000044408		`,
(Document Number of Corporation	n (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation add	opts the following amendm
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corporal	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	213 LEEWARD	ISLAND
	CLEARWATER,	FL 33767
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	 	·····
D. If amending the registered agent and/or registered office ac		e of the
new registered agent and/or the new registered office addr	ess:	
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	, Florida_	Mr. C. J.
(Ci	<i>19)</i>	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		of the position.
Signature of New Registere	d Agent, if changing	

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>John</u>	1 Doe	·
X Remove	V Mik	e Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	PRES	MICHAEL ANDOLINO	213 LEEWARD ISLAND CLEARWATER, FL 33767
Change Add Remove	PRES	LUCILLE GERARDO	213 LEEWARD ISLAND CLEARWATER, FL 33767
3) Change Add Remove		· ·	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
·	•
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
	

The date of each amendment(s) adoption: 11-01-2011	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament 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):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	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 11 01	2011
selecte	lirector, president or 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)
	LUCILLE GERARDO
	(Typed or printed name of person signing)
	PRES
	(Title of person signing)