## P11000015678

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12 SEP 19 AN 9:1

FILED SECRETARY OF STATE TALLAHASSEF. FLORIDA

Amend

8EP 2 1 2012 T. CAULEY

## ... COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Loxahatche	ee Pines Proper	ty Maintenance		
DOCUMENT NUMBER: P1100015678					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corres	pondence concerning this mat	ter to the following:			
	Sheryl Burdick				
	Name of Contact Person				
	Loxahatchee Pines Property Maintenance				
	Firm/ Company				
	16280 East Preakness Dr.				
		Address			
	Loxahatchee Pine	es Property Maii	ntenance		
		City/ State and Zip Code	e		
par	parayb@yahoo.c	om			
11-		ed for future annual report	notification)		
For further information	o concerning this matter, pleas	e call:			
Sheryl Burdick		at (561	, 753-2312		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artment 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		Street Address Amendment Section Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			

## Articles of Amendment

to
Articles of Incorporation

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

	01
Loxahatchee Pines Property Maintena	ince Inc 12 SEP 19 AM 9: 45
(Name of Corporation as currently filed with the	
P110001516	<u>98</u>
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>
	The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association." or the abbreviation."	or "Co". A professional corporation name must contain the on "P.A."
B. Enter new principal office address, if applicable:	16280 East Preakness
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Loxahatchee, Fl. 33470
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16280 East Preakness Dr.
	Loxahatchee, Fl. 33470
D. If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office add	
Name of New Registered Agent	
	Preakness Dr.
	la street pddress) Na + Chee 33470
New Registered Office Address:	hatchee, Florida 33470 (Zip Code)
,,	( ) · · · · · · · · · · · · · · · · · ·
New Registered Agent's Signature, if changing Registered Age	<u>sent:</u>
I hereby accept the appointment as registered agent. It amforbil	liar yith and accept the obligations of the position.
July // C	wed Agant if changing
Signature of New Register	геа лует, у спануту

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 <math>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.

X Change	<u>PT</u> .	John Doe		
X Remove	<u>Y</u> 1	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) X Change	<u>P</u>	Sheryl Burdick	16280 East Preakness DR	
Add			Loxahatchee, Fl. 33470	
Remove				
2) Change	P	Raymond Burdick	16280 East Preakness Dr.	
Add			Loxahatchee, Fl. 33470	
X Remove				
3) Change	<u>V</u>	Sheryl Burdick	16280 East Preakness Dr.	
Add			Loxahatchee Fl. 33470	
X Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Arti- tach additional sheets, if necessary).	(Be specific)
_	
n amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
ovisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption: 9/16/2012
Effective date <u>if applicable</u> : 9/	16/2012
	(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) officient 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)
	(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 9/16/2	012
selecte	irector, 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)
	Sheryl Burdick
	(Typed or printed name of person signing)
	President
	(Title of person signing)