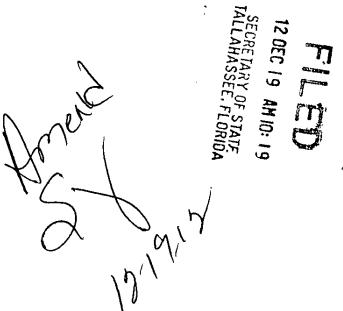
(Requestor's Name)	
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(Business Entity Name)	12/19/1201007013
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BEACH BU	JMS FT MYERS	S BEACH INC
DOCUMENT NUMI	BER: P1200009548	38	
The enclosed Articles	of Amendment and fee are st	abmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	JOHN ABBOND	ANDOLO	
		Name of Contact Person	on
	400.05.407.44	Firm/ Company	
	102 SE 1ST AVE		
	CAPE CORAL, F	Address	
	CAPE CORAL, F	City/ State and Zip Co	do
	40.00		dc .
jabl	oy1052@comcas		
	n-mail address: (to be u	sed for future annual repoi	t notification)
for further information	concerning this matter, pleas	se call:	
JOHN ABBO	NDANDOLO	at (239	, 872-4894
Name o	f Contact Person		ode & Daytime Telephone Number
inclosed is a check for	the following amount made	payable to the Florida Dep	partment 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)
	ing Address		t Address
	ndment Section		dment Section
	iion of Corporations Box 6327		on of Corporations n Building
•	hassee, FL 32314		n Bunding Executive Center Circle
· and			passee, FL 32301

#### **Articles of Amendment** to **Articles of Incorporation** of



## BEACH BUMS FT MYERS BEACH INC

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

P12000095488

(Document Number of Corporation (if known)

endment(s) to

s. If amending name, enter the new name of the c	<del>rporation:</del>		
me must be distinguishable and contain the wo 'orp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	" "Inc," or "Co". A professional corpore		
Enter new principal office address, if applicable	1190 ESTERO	ERO BLVD	
Principal office address MUST BE A STREET AD		H, FL 33931	
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u> )		
		<del></del>	
		<u>1e of the</u>	
If amending the registered agent and/or registenew registered agent and/or the new registered		ne of the	
		ne of the	
new registered agent and/or the new registered	office address:	ne of the	
new registered agent and/or the new registered	office address:	ne of the	
	office address:		

# 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:	ore, and sany c	omin, 5) as an Aga.	
X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
X Remove	<u>v</u> <u>v</u>	<u>like Jones</u>	
<u>X</u> Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1)Change	<u>V</u>	PHILLIP DEFRANCISCO	19883 GATOR CREEK CT
Add		· · · · · · · ·	N FT MYERS, FL 33903
X Remove			
2) Change	V	KIMBERLY ABBONDANDOLO	102 SE 21ST AVE
X			CAPE CORAL, FL 33990
Remove			
3 ) Change		****	
Add			
Remove			
4) Change			
Add			
Remove			
5) Channa			
5) Change			
<del></del>			
Remove			The state of the s
6) Change			
Add			-
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		- <u> </u>
		··
****		
If an amendment provides for an exch	ange, reclassification, or cancellation of	issued shares.
provisions for implementing the amer	idment if not contained in the amendme	nt itself:
provisions for implementing the amer (if not applicable, indicate N/A)	idment if not contained in the amendme	<u>nt itself:</u>
provisions for implementing the amer	adment if not contained in the amendme	nt itself:
provisions for implementing the amer	ndment if not contained in the amendme	nt itself:
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provisions for implementing the amer	ndment if not contained in the amendme	nt itself:
provisions for implementing the amer	ndment if not contained in the amendme	nt itself:

The date of each amendment(s) add	option: 11/16/12
Effective date if applicable: 11/	16/12
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) scient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes east fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voung group)
☐ The amendment(s) was/were adopted action was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder
Dated 12/17/1	
Signature	etor president or other officer – if directors or officers have not been
kelecteyl.	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
<u>.</u>	OHN ABBONDANDOLO
	(Typed or printed name of person signing)
<u>_</u>	PRESIDENT
_	(Title of person signing)