## P13000040884

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SECRETARY OF STATE AND SECRETARY OF STATE

DEC 2 8 2016

T. LEWIT IX



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	Matthew Larson H	omes, Inc.					
DOCUMENT NUMBER: P13000040884							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
	Matthew Larson						
	Name of Contact Person						
	Firm/ Company						
	7575 E Bay Blvd.						
•	Address						
	Navarre, FL 32566						
•		City/ State and Zip Cod	e				
		· -					
For further information	E-mail address: (to be us	sed for future annual report	notification)				
Matthew Larson		at (	910-5992				
Name o	of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:				
S35 Filing Fce	□\$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					

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Larson's Landing Real Estate Investment	s, Inc.		
(Name (	of Corporation as currentl	y filed with the Florida Dep	t. of State)
P13000040884			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
Matthew Larson Homes, Inc.			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professional corpor	orated" or the abbreviation ration name must contain the
D. Entar navy national office address	if annliaghlar	N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli	bl		
(Mailing address MAY BE A POST		N/A	
	_		
D. If amending the registered agent an	nd/or registered office addi	ess in Florida, enter the na	me of the
new registered agent and/or the new	w registered office address	<u>:</u>	
Name of New Registered Agent	N/A		
	(Florida str	eet address)	
N P	N/A		Plantin
New Registered Office Address:		(City)	_, Florida (Zip Code)
		. •	•
New Registered Agent's Signature, if c			
I hereby accept the appointment as regis	tered agent. I am familiar v	vith and accept the obligation	ns of the position.
			<b>~</b>
			<b>26</b> SE
<del>.</del>	Signature of New R	egistered Agent, if changing	50 5
			SEY 22

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)			
N/A			
· · · · · · · · · · · · · · · · · · ·			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
N/A			
<del></del>			

	12/1/2016	
The date of each amendment(s) ad date this document was signed.	option:	_, if other than the
Effective date if applicable:	2016	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bidocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	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 i	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
12/1/2016 Dated		
Signature X A	What E	
(Bý a di	rector president or other officer - if directors or officers have not been	
	t, by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Matthew Larson	
•	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	