## P13000068309

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, (Re	equestor's Name)	
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
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SEP 1 2 2013

T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	A 11011.	E LANDINGS I	NC
DOCUMENT NUMB	BER: P1300006830	9	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	WILLIAM ADAMS	}	
	·	Name of Contact Pers	on
	ADAMS ACCOUN	NTING AND CO	DNSULTING INC
		Firm/ Company	
	13100 PINE BOR		
		Address	NDIDA 22440
	PALM BEACH G	City/ State and Zip Co	ORIDA 33418
			ue
ada	mswilliams@bells		
	E-mail address: (to be us	ed for future annual repo	rt notification)
For further information	concerning this matter, please	e call:	
William Adan	าร	at (561	, 626-9096
Name of Contact Person		Area C	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florida De	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)
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amer Divis Clifto 2661	t Address adment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## **EXCLUSIVE LANDINGS INC.**

(Name of Corporation as c	urrently filed with the Flo	orida Dept. of State)		
P13000068309				
(Document)	Number of Corporation (if	known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	Tlorida Profit Corporation ado	pts the following ar	nendment(s) to
A. If amending name, enter the new nam	e of the corporation:			
			Th	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or "C	o". A professional corporati	ated" or the abbre on name must con	eviation tain the
B. Enter new principal office address, if (Principal office address MUST BE A STE		N/A	<del></del>	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		N/A		
D. If amending the registered agent and		ess in Florida, enter the name	of the	
new registered agent and/or the new	registered office address: N/A			
Name of New Registered Agent	N/A	•		
_	(Florida stre			
	V/A	·		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if cha	inging Registered Agent:	ith and appoint the ablicacions	of the position	
I hereby accept the appointment as register	ea ageni. 1 am jamiliar w	un ana accept the obtigations	oj ine position.	
Sign	nature of New Registered A	gent, 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 <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.

Example: X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>v</u> <u>m</u>	ike Jones	
_X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	<u>s</u>	LYDIA HALL	1772 SE 6TH LANE
Add			OKEECHOBEE, FL
Remove			34974
2) X Change	Р	SARAH HALL	1772 SE 6TH LANE
Add			OKEECHOBEE, FL
Remove			34974
3 ) Change	<u> </u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			<del> </del>
Remove			·
6) Change			
6) Change			
Add			
Remove			

(Attac	nending or adding ch additional sheet	s, if necessary).	(Be specific)	inge(s) here:			
<i>//</i> A			<del>.</del>				
					<u>.                                    </u>		
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pro	n amendment provivisions for implen (if not applicable	nenting the ame	hange, reclassi endment if not	fication, or can- contained in th	cellation of issu e amendment i	ed shares, tself:	
		· · · · · · · · · · · · · · · · · · ·					
		<del></del>		<del>.,,,,,</del>	<del> </del>		
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**AUGUST 28, 2013** The date of each amendment(s) adoption: if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 (voting group) ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) LYDIA HALL (Typed or printed name of person signing) PRESIDENT (Title of person signing)