

P15000003724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

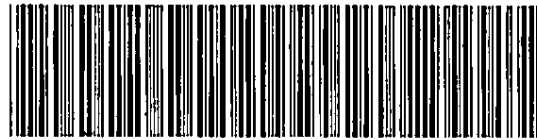
(Business Entity Name)

(Document Number)

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2017 OCT 10 PM 3:20
10/10/17

C. GOLDEN

OCT 11 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Robert Spector Properties, Inc

DOCUMENT NUMBER: P15000003724

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Trudy Knecht
(Name of Contact Person)

Robert Spector Properties, Inc
(Firm/ Company)

5730 S. Suncoast Blvd
(Address)

Homosassa, FL 34446
(City/ State and Zip Code)

Spectorideas@outlook.com
(E-mail address: (to be used for future annual report notification))

For further information concerning this matter, please call:

Trudy Knecht at 352 503-2099
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2017 OCT 10 PM 3:21
FILED
U.S. DISTRICT COURT
SOUTHERD DISTRICT OF CALIFORNIA
SAN JOSE
CLERK OF COURT
JULIA A. HARRIS
JULIA.A.HARRIS@USDC.SD.CA.GOV
TEL: 408.281.6000
FAX: 408.281.6001
WWW.USDC.SD.CA.GOV

Robert Spector Props Ares, Inc. - P15000003724
(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Trudy Knecht
5730 S. Suncoast Blvd Homosassa FL
 (Florida street address) 34446

New Registered Office Address:

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Theresa Knight
Signature of New Registered 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
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1) <input type="checkbox"/> Change	<u>Registered Agent</u>	<u>Shannon E. Duvall</u>	<u>5730 S. Suncoast Blvd</u> <u>Homosassa, FL 34446</u>
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			

2) <input type="checkbox"/> Change	<u>COO</u>	<u>Shannon E. Duvall</u>	<u>5730 S. Suncoast Blvd</u> <u>Homosassa, FL 34446</u>
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			

3) <input type="checkbox"/> Change	<u>Registered Agent</u>	<u>Trudy Knecht</u>	<u>5730 S. Suncoast Blvd</u> <u>Homosassa, FL 34446</u>
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			

4) <input type="checkbox"/> Change	<u>COO</u>	<u>Trudy Knecht</u>	<u>5730 S. Suncoast Blvd</u> <u>Homosassa, FL 34446</u>
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			

5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: September 1, 2017
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 10/5/17

Signature Trudy Knecht
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Trudy Knecht
(Typed or printed name of person signing)

Chief Executive Officer
(Title of person signing)