(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
<u>_</u>	WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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07/03/17--01010--024 **35.00

07-31-17

S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 10, 2017

CHRISTIANA H LIPSCOMBE LBCW PROPERTY INVESTMENTS, INC. 1380 29TH AVENUE VERO BEACH, FL 32960

SUBJECT: LBCW PROPERTY INVESTMENTS, INC.

Ref. Number: P15000009021



We have received your document for LBCW PROPERTY INVESTMENTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 717A00013814

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ATION: LBCW PROPERT	Y INVESTMENTS, INC	
DOCUMENT NUMB	P15000000001		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	CHRISTIANA H LIPSCOM	BE	
•		Name of Contact Person	n
	LBCW PROPERTY INVES	TMENTS, INC	
-		Firm/ Company	AU-HHR.
	1380 29TH AVE	. ,	
•		Address	
	VERO BEACH, FL 32960		
-		City/ State and Zip Cod	e
CHRI	STIANA.AQC@GMAIL.CC	DM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
CHRISTIANA H LIPS	ССОМВЕ	at (⁷⁷²	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	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)
Ame Divis P.O.	ing Address Induction of Corporations Box 6327 hassec, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassec, FL 32301

Articles of Amendment to Articles of Incorporation of

(Nama		
(Maine	of Corporation as currently filed with the Fl	orida Dept. of State)
P15000009021		
	(Document Number of Corporation (if kn	own)
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this Florida Profit Cor	poration adopts the following amendment(s)
A. If amending name, enter the new n	name of the corporation:	
name must be distinguishable and coi "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	ntain the word "corporation," "company," o mation "Corp," "Inc," or "Co". A profession ation," or the abbreviation "P.A."	The new r "incorporated" or the abbreviation nal corporation name must contain the
B. <u>Enter new principal office address.</u> (Principal office address <u>MUST BE A.S</u>		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		
(Mailing address <u>MAY BE A POST</u>		17 JUL 2
(Mailing address MAY BE A POST D. If amending the registered agent as	nd/or registered office address in Florida, ent	er the name of the
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Florida, entew registered office address:	
(Mailing address MAY BE A POST D. If amending the registered agent as	nd/or registered office address in Florida, entew registered office address:	Pig. 11
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Florida, entew registered office address: CHRISTIANA H LIPSCOMBE	
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Florida, entew registered office address: CHRISTIANA H LIPSCOMBE 1380 29TH AVE	

Page 1 of 4

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.

X Change	<u>PT</u> <u>John</u>	n Doe		
X Remove	<u>V</u> <u>Mik</u>	<u>se Jones</u>		
X Add	SV Sall	y Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) X Change	P	CHRISTIANA H LIPSCOMBE	1380 29TH AVE	
Add			VERO BEACH, FL	
Remove			32960	_
2) Change				
Add			····	_
Remove				_
3)Change				_
Add				_
Remove				_
4) Change				_
Add				_
Remove				_
5) Change		*****		_
Add				_
Remove				-
6) Change				_
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
14+192-00	44-109	
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	A STATE OF THE STA	
*		
provisions for implementing the amo	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
t		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 6/28/2017	
(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 document's effective date on the Department of State's records.	te will not be listed as the
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):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	त
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
6/28/2017 Dated Signature	
(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 cour appointed fiduciary by that fiduciary)	t
CHRISTIANA H LIPSCOMBE	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	