9150000 73989

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	idress)	
. (Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	TURNBERRI HOLDING	J5, INC.				
DOCUMENT NUMBER	P15000073989						
The enclosed Articles of A	mendment and fee are su	ibmitted for filing.					
Please return all correspon	dence concerning this ma	itter to the following:					
		PEDRO P. SAEZ					
	Name of Contact Person						
•	SAEZ & ASSOCIATES						
	Firm/ Company						
	777 BRICKELL AVENUE, SUITE 1110						
		Address					
	MIAMI. FL 33131						
		City/ State and Zip Cod	le				
		PSAEZ@SAEZLAW	COM 🗸				
	E-mail address: (to be u	sed for future annual report	notification)				
For further information col MARIE	ncerning this matter, plea	se call:at (3580028				
Name of Co	ontact Person		ode & 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)				
	Address	Street Address					
	ent Section of Corporations		Amendment Section Division of Corporations				
P.O. Box	c 6327	Clifton Building					
Tallahas	see, FL 32314	2661 E	Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TURNBERRY HOLDINGS, INC.

(Name of Corporation a	as currently filed with the Florida Dept. of State)
	P15000073989
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States at Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpo	oration:
	The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abb	'corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(38</u>)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	22
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
	ec address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida (City)
	τζης Code)
New Registered Agent's Signature, if changing Registe	ered Agent:
hereby accept the appointment as registered agent. I ar	m familiar with and accept the obligations of the position.
Signatu	re 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: XChange	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1)' Change	DVP	_	Alberto Bagdadi	_	1025 Buchanan St.
X Add					Hollywood, FL 33019
Remove					
2) X Change	DPTS		Sofia Leon		490 Sawgrass Corporate Pkwy
Add					Suite 200
Remove					Sunrise ,FL 33325
3) Change		_		-	
Add					
Remove					
4) Change		<u>.</u>			
Add					
Remove					
5) Change				_	
Add					
Remove					
6) Change		_		_	
, Add		-			
Remove					

E. If amending or adding additional Arti (Attach additional sheets, if necessary).					
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. If an amendment provides for an excl	iange, reclassifica	tion, or cancell	ation of issued	shares.	
provisions for implementing the ame	ndment if not con	tained in the a	mendment itse	<u>lf:</u>	
(if not applicable, indicate N/A)					
N/A					
		_			

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date 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 ame by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
 □ 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. 	
Signature (By a director, president or other officer – if directors or officers have a selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	not been
Sofia Leon	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	