

P16000037183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

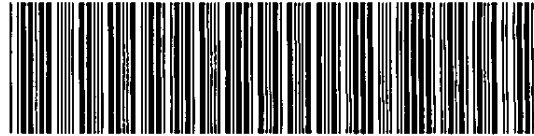
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300285455613

FILED

2018 MAY -5 AM 8:11

RECEIVED

DEPARTMENT OF REVENUE

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

16 MAY -5 AM 10:47

span

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 114644 8093506
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : April 22, 2016
ORDER TIME : 9:28 AM
ORDER NO. : 114644-005
CUSTOMER NO: 8093506

DOMESTIC AMENDMENT FILING

NAME: AQUA SUITES, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: _____

ARTICLES OF CORRECTION

For

AQUA SUITES, INC.

Name of Corporation as currently filed with the Florida Dept. of State

P16000037183

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct Formation
(Document Type Being Corrected)

filed with the Department of State on April 25, 2016
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Article VI - The name and address of the incorporator is:

Heidi S. Barnea

134 Atlantic Avenue

Tavernier, FL 33070


Correct the inaccuracy, incorrect statement, or defect:

Article VI- The name and address of the incorporator is:

Heidi S. Barnes

134 Atlantic Avenue

Tavernier, FL 33070


(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

HEIDI S. BARNES

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35.00