

PM17D000073526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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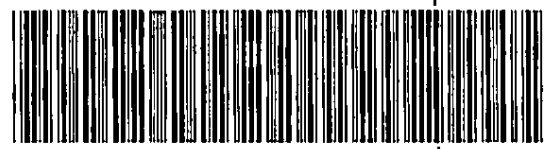
(Business Entity Name)

(Document Number)

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OCT 24 2017  
ALBRITTON

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PATRON PROPERTY MAINTENANCE INC.

DOCUMENT NUMBER: PI17000073526 EIN# 82-2671570

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

Please return all correspondence concerning this matter to the following:

Juan Carlos Hector  
Name of Contact Person  
PATRON PROPERTY MAINTENANCE INC.  
Firm/ Company  
4700 Millenia Blvd.,  
Address  
Orlando Florida 32839  
City/ State and Zip Code  
jhector@goldcoastflco.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call

Juan Carlos Hector at ( 407 ) 362-0928  
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:

- \$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)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 13, 2017

JONATHAN CASALS  
PATRON PROPERTY MAINTENANCE INC.  
4700 MILLENIA BLVD  
ORLANDO, FL 32839

SUBJECT: PATRON PROPERTY MAINTENANCE INC.  
Ref. Number: P17000073526

We have received your document for PATRON PROPERTY MAINTENANCE 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.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P03000046272 - GOLD COAST CONSTRUCTION COMPANY.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 517A00020692

Articles of Amendment  
to  
Articles of Incorporation  
of

PATRON PROPERTY MAINTENANCE INC.

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

P17000073526

EIN# 82-2671570

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

GOLD COAST CONSTRUCTION GROUP INC. *The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

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

4700 Millenia Blvd.,

Orlando Florida 32839

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

4700 Millenia Blv

Orlando Florida 32839

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 Jonathan Casals

4700 Millenia Blvd.,

(Florida street address)


New Registered Office Address: Orlando Florida 32839

(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.*

  
Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	_____	_____	_____
<input 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			



The date of each amendment(s) adoption: SEPTEMBER 29-2017 if other than the date this document was signed.

Effective date if applicable: SEPTEMBER 29-2017  
*(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 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

by \_\_\_\_\_  
*(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.

Dated SEPTEMBER 29-2017

Signature *Juan Carlos Hector*

(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)

Juan Carlos Hector

(Typed or printed name of person signing)

President

(Title of person signing)

