

P19000 060 856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

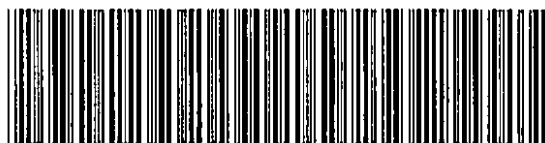
(Business Entity Name)

(Document Number)

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2019 SEP 26 PM 2:15  
TALLAHASSEE, FL

SEP 27 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 17, 2019

JOHN ROPP  
2104 DEL PRADO BLVD S STE 3  
CAPE CORAL, FL 33990

SUBJECT: BONITA BRUNCH II INC  
Ref. Number: P19000060856

We have received your document for BONITA BRUNCH II 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):

Please check the correct type of action for Gjovalin Vushaj. There's nothing to change for that person did you mean to check the Add BOX ?. If you are trying to add Gjovalin check the add box. Also if you are trying to remove Joe vushaj check remove.

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.

Catherine M Wood  
Regulatory Specialist II

Letter Number: 319A00019157

RI  
2019 SEP 25 PM 12:19  
100

Articles of Amendment  
to  
Articles of Incorporation  
of

Bonita Branch II Inc.

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

P 19000060856

(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:**

*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**)

14261 Tamiami Trail Suite 11  
Fort Myers, FL 33912

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

14261 Tamiami Trail Suite 11  
Fort Myers, FL 33912

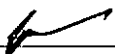
**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent Gjovalin Vushaj  
8659 River Homes Lane, Bldg 1 Apt 208  
Bonita Springs, (Florida street address) FL, 34135

New Registered Office Address: \_\_\_\_\_, Florida  
(City)

**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

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:

X Change                      PT              John Doe

X Remove                      V              Mike Jones

X Add                      SV              Sally Smith

| Type of Action<br>(Check One) | Title       | Name                   | Address                         |
|-------------------------------|-------------|------------------------|---------------------------------|
| 1) <u>Change</u>              | <u>PVPS</u> | <u>Gjovalin Vushaj</u> | <u>8659 River Homes Lane</u>    |
| <u>X</u> Add                  |             |                        | <u>Bldg 1 Apt 208</u>           |
| <u>Remove</u>                 |             |                        | <u>Bonita Springs, FL 34135</u> |
| 2) <u>Change</u>              |             | <u>Joe Vushaj</u>      | <u>8659 River Homes Lane</u>    |
| <u>Add</u>                    |             |                        | <u>Bldg 1 Apt 208</u>           |
| <u>X</u> Remove               |             |                        | <u>Bonita Springs, FL 34135</u> |
| 3) <u>Change</u>              |             |                        |                                 |
| <u>Add</u>                    |             |                        |                                 |
| <u>Remove</u>                 |             |                        |                                 |
| 4) <u>Change</u>              |             |                        |                                 |
| <u>Add</u>                    |             |                        |                                 |
| <u>Remove</u>                 |             |                        |                                 |
| 5) <u>Change</u>              |             |                        |                                 |
| <u>Add</u>                    |             |                        |                                 |
| <u>Remove</u>                 |             |                        |                                 |
| 6) <u>Change</u>              |             |                        |                                 |
| <u>Add</u>                    |             |                        |                                 |
| <u>Remove</u>                 |             |                        |                                 |

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

[illegible]

(if not applicable, indicate N/A)

[illegible]

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

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 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 8/22/15

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 court appointed fiduciary by that fiduciary)

Gjovalin Vushaj

(Typed or printed name of person signing)

PVPS

(Title of person signing)