## P21000057688

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: FIVE STAR PAL	M BEACH INC			
	1BER: P21000057688				
	es of Amendment and fee are si	ubmitted for filing.			
Please return all corr	respondence concerning this ma	atter to the following:			
	LAURA A. STREIMER				
		Name of Contact Perso	n		
	STREIMER & FLUSBERG, P.A.				
		Firm/ Company			
	1361 SAWGRASS CORPORATE PARKWAY #100				
		Address			
	SUNRISE, FL. 33323				
	<del>-</del>	City/ State and Zip Cod	e		
	INFO@ SFCPA.NET				
	_	sed for future annual report	natification)		
	on concerning this matter, plea				
LAURA A. STREIMER		at (			
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check (	for the following amount made	payable to the Florida Dep	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
	rendment Section vision of Corporations	Amendment Section			
	). Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FIVE STAR FALM BEACH THE				
(Name	of Corporation as currently	y filed with the Florida Dep	t. of State)	
P21000057688				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this A	Florida Profit Corporation &	dopts the following amendn	nent(s) to
A. If amending name, enter the new n	ame of the corporation:			
NA .			_The ne	w
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered," "professional association,	Corp," "Inc," or "Co". A	ompany," or "incorporated" professional corporation n	or the abbreviation "Corp., ame must contain the wor	rd
B. Enter new principal office address.	if annlicable:	NA		
B. Enter new principal office address MUST BE A S	TREET ADDRESS)			
C. Enter new mailing address, if appl	icable:	NA		
(Mailing address MAY BE A POST	OFFICE BOX)			
D. If amending the registered agent an	d/or registered office addre	ss in Florida, enter the nan	ne of the	
new registered agent and/or the new	v registered office address:			
Name of New Registered Agent	BNK ENTERPRISES, INC			
170.000	1640 W OAKLAND PARK	BLVD #202		
	(Florida stree	t address)	<del></del>	
	OAKLAND PARK		Florida 33311	
New Registered Office Address:		City)	(Zip Code)	
New Registered Agent's Signature, if cl	nanging Registered Agent:		of the position	
hereby accept the appointment as regista	ered ageni. I am jamiliar wi	n ana accept the obligations	of the position. 292	
		''9	**************************************	
			ا د	
	Signature of New Reg	istered Agent, if changing	<u> </u>	
Check if applicable  The amendment(s) is/are being filed pu	ursuant to s. 607.0120 (11) (e)	. F.S.	င္ဘဲ	
and an amount of the country and per	(11)	• · ·=•	ប	

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 = ChiefExecutive 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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	KEVIN DOWNS	1640 W OAKLAND PARK BLVD
Add			OAKLAND PARK, FL. 33311
X Remove	D	BRIAN MACOMBER	1640 W OAKLAND PARK BLVD
2) Change			OAKLAND PARK, FL. 33311
Add			1640 W OAKLAND PARK BLVD
X Remove 3) Change	D	NIGEL BOGAERT	OAKLAND PARK, FL. 33311
Add			
X Remove		BNK ENTERPRISES, INC	1640 W OAKLAND PARK BLVD
4) Change	P 	DINK ENTER RIDES, INC	OAKLAND PARK, FL. 33311
XAdd			
Remove			
5) Change			
Add			
Remove			
б) Change	<del> </del>	<u> </u>	
Add			
Remove			

	dding additional Articles, sheets, if necessary). (Bo	specific)			
A		<u>.</u>			<del></del>
<u></u>					
			- careellation of is	med shares	
f an amendment	plementing the amendmen	nt if not contained	in the amendment	t itself:	
(if not applied	ble, indicate N/A)				
. <u></u>					
	<u> </u>				

. . . .

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 document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	ent(s)
☐ The amendment(s) was/were a must be separately provided for	approved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(10m/8 8, 4-1)	
7-23-202	1	
Dated		
Signature	Complement has a state of the s	
(By a selec	director, president or other officer – if directors or officers have not be ted, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	ourt
	NIGEL BOGAERT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	