

P230000055204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

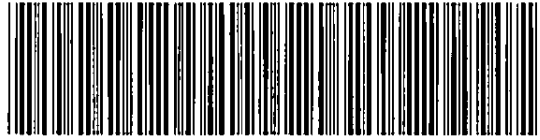
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amended

06/25/24--01013--024 **35.00

FILED
2024 JUN 25 AM 8:47
CLERK OF STATE
TREASURY DEPT.

JUL 16 2024

A RAMSEY

RONALD S. WEBSTER

COUNSELOR AT LAW

TELEPHONE: (239) 394-8999
FACSIMILE: (239) 394-3511

THE ESPLANADE
800 NORTH COLLIER BLVD., #203
MARCO ISLAND, FLORIDA 34145

E-MAIL: ron@ronwebster.com
INFO: www.ronwebster.com

June 17, 2024

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

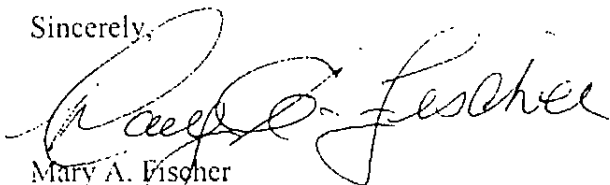
RE: Luxury Homes of SW Florida, Inc.

Dear Sir or Madam:

Enclosed please find an Amendment to Articles of Incorporation relative to the above-mentioned corporation. Also enclosed is a check in the sum of \$35.00 representing the filing fee in this regard.

Should you have any questions relative to this matter, please do not hesitate to contact this office.

Sincerely,



Mary A. Fischer
Legal Assistant

MAA
enclosure

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LUXURY HOMES OF SW FLORIDA, INC.

DOCUMENT NUMBER: P23000055204

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

Please return all correspondence concerning this matter to the following:

Mary Fischer
Name of Contact Person
Law Office of Ronald S. Webster
Firm/ Company
800 N. Collier Blvd. #203
Address
Marco Island, FL 34145
City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Fischer at (239) 394-8999
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2024 JUN 25 AM 8:47

LUXURY HOMES OF SW FLORIDA, INC.

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

P23000055204

(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**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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

(Florida street address)

New Registered Office Address:

(City)

Florida

(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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

(Attach additional sheets, if necessary)

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.

Example:

<input checked="" type="checkbox"/> Add	SV	Sally Smith
---	----	-------------

Address

_____ Add _____

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

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

100

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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

Dated 5.25.24 _____

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)

NICHOLAS CORNWELL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)