Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000761613)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : ADAMS AND REESE LLP

Account Number: 076077001601

Û

06

\$35.00

Fax Number

Phone : (727) 502-8230 : (727)502-8943

**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please. **

Email Address:

thomas.dart@arlaw.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN BAY POINT LOGOS, INC.

Certificate of Status Certified Copy Page Count Estimated Charge

COVER LETTER

Articles of Amendment to Articles of Incorporation of

Name of Corporation a	s currently Med with the F	Invide Dany of Charles	
BAY POINT LOGOS, IN		on tou ment or Stare)	
(Docume	nt Number of Corporation (II	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statuces, this i	Plorida Profit Corporation adopts the following .	amendment(s) to
A. If amending name, enter the now u	ame of the corporation:		
name must be distinguishable and con "Corp." "Inc.," or Co.," or the design word "chartered." "professional associa	ration "Corp," "Inc." or "i	"," "company," or "incorporated" or the abi	The new previouson mustain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		6525 North Quali Hollow Road, Suite 513	
		Memphis, Tennessee 38120	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		6525 North Quali Hollow Road, Suite 513	
		Memphis, Tennessee 38120	
D. If amending the registered agent an new registered agent and/or the new	ul/or registered office address:	ess in Morids, enter the name of the	
Name of New Registered Agent	Thomas H. Dart,	`	
	1515 Ringling Bl		
	(Flor ida stre	et address)	
New Registered Office Address:	Sarasota	Florida 34236	
	· (Civ)	(Zip Code)	
	innettes Region (Agent Agent) Agent (Agent) and (Agent) and (Agent) and (Agent) are agent (Agen	ith and accept the obligations of the postition.	14 HAR 31
			$\frac{3}{2}$
			PHI

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 officeredirector 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.

By Annualist

X.Change	ex 1	ohn Doe	
X Remove	X V	Mike Jones	
_X ∧dd	e xx	ially Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	FLAUTT, FRANK LJR.	4000 Sandestin Blvd South
Add			Destin, FL 32550
Remove			
2) Change	<u>VP</u>	KAMM, ROBERT T	4000 Sandestin Blvd South
Add			Destin, FL 32650
Remove 3) Change	<u>P</u>	SIMPSON, EDWARD L.	6525 North Quall Hollow R
Add		·	Sulte 513
Remove			Memphis, TN 38120
4) Change			
Add			
5) Change			
Add			
6) Change			
Add			
Remove			

Page 2 of 4

	rticles, enter change(s) here:). (Be specific)	
		
		_
		-
····		_
		
	·	
		_
··· — ···		
	·	
	· · · · · · · · · · · · · · · · · · ·	
		_
, ,		_
•		
	The state of the s	
no amendment provides for an exc rovisions for implementing the ame	chenge, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itselfi	
(If not applicable, indicate NA)		
(I not applicable, indicate NA)		_
(If not applicable, indicate NA)		_
(If not applicable, Indicate NA)		
([f not applicable, Indicate NA)		
([f not applicable, Indicate N/A)		
([f not applicable, Indicate NA)		
([f not applicable, Indicate N/A)		
(If not applicable, Indicate N/A)		

The date of each amendment(s) adoption:	if other than the
·	
Effective date if applicable: (no more than 90 days after amendment file date)	
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 antitled to vote separately on the amendment(s):	
The number of votes cast for the amendment(s) was/were sufficient for approval	•
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) wes/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer – is 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)	
Edward L. Simpson	_
(Typod or printed name of person signing)	
President	
(Title of person signing)	