P97000067886

(Requestor's Name)		
, ,		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	-	
(Business Entity Name)		
(Document Number)		
	_	
Certified Copies Certificates of Status	_	
Special Instructions to Filing Officer:		





800141406388

01/20/09--01072--012 **\$2.50

FILED
2009 FEB -4 AM IO: 31
SECRETARY OF STATE

Amend

TB 7-5-00

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ARRITAGE	E OAKS COOLE + C	SWATEY CLIB REALTY, INC.
DOCUMENT NUMBER: 191000	18850	
The enclosed Articles of Amendment and fee	are submitted for filing.	
	is matter to the following: SKENICH of Contact Person)	
HERITAGE CAKS CO	DLF + COUNTRY CLAB	REALTY, INC.
1049, Six Mile	CYPRESS PXWY #205 (Address)	
ST MYERS S. (City/s	339(ol.) State and Zip Code)	
For further information concerning this matter	at (<u>234</u>) Sus	5- 6033 ne Telephone Number)
Enclosed is a check for the following amount in	made payable to the Florida De	epartment of State:
\$35 Filing Fee \$\times \$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	Street Address Amendment Section Division of Corporations	s

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



January 29, 2009

HENRIETTA OAKS GOLF & COUNTRY CLUB REALTY, INC. HENRIETTA SUSKEVICH 10491 SIX MILE CYPRESS PKWY #205 FORT MYERS, FL 33966

SUBJECT: HERITAGE OAKS GOLF & COUNTRY CLUB REALTY, INC.

Ref. Number: P97000067886

We have received your document for HERITAGE OAKS GOLF & COUNTRY CLUB REALTY, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

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) 245-6925.

Letter Number: 009A00003254

Teresa Brown Regulatory Specialist II

10.283.27 (0.4)

Articles of Amendment 20
to . Market Mark
Articles of Incorporation
of Alexander And
(Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently fried with the Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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: 5393 BARDMOOK DRIVE
(Principal office address MUST BE A STREET ADDRESS)
SARASOTA, The BYDYL
·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1049, Six Mile Cypress Kndy #205 27. Myers, \$\frac{1}{2}\$, myers, \$\frac{1}{2}\$, 3391040
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:
new registered agent and/or the new registered office address.
Name of New Registered Agent: HENRIETTA JUSKEVICH
10491 Six Mile CYPRESS PRWY #205
New Registered Office Address: (Florida street address)
جار Myers , Florida 339ماما (City) (Zip Code)
(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.
\mathcal{A}_{\cdots}
Signature of New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
76	HELEN I SARVER	9232 P. NEAPPLE ROAD FT. MYERS, FL 33912	Add Remove
T20	DAVID C. SMITH	18225 RICCARDO ST. MYERS FL 33912	Add Remove
<u>DfT</u>	HENRIETTA SUSKEVICH	8891 STACHORN WAY ST. MYERS, FL 33908	Add Remove
D'E'Ab	ARTHUR Suskevich	SAME AS ABOUR	GGAM
(attach ad	lditional sheets, if necessary). (Be spec	ific)	
<u>provisio</u>	nendment provides for an exchange, recons for implementing the amendment if of applicable, indicate N/A)		
			

The date of each amendment(s) adoption:
Effective date if applicable: Annually 1, 2009 (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 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)
(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 1-15-09
Signature dennie Ta Justinich
(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)
$\langle \cdot \cdot \cdot \rangle$
HENRIETTA SUSKEVICH
(Typed or printed name of person signing)
TRECTOR RESIDENT TREASURER (Title of person signing)