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SECRETARY OF STATE TALLARASSEE FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ROBINSHORE	RENOVATION AND CUSTOM HOM	ES, INC.
DOCUMENT NUMBER: P99000085719		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Lori Addison or Aliso	<u> </u>	<u>- </u>
(Name of	Contact Person)	
Robinson Renovation	and Custom HOmes, Inc	•
(Firm	Company)	
·	Address)	
Gainesville, FL (City/Stat	32606ee and Zip Code)	<u> </u>
For further information concerning this matter, pl	lease call:	
Lori Addison or Alison Kinney (Name of Contact Person)	at (352) 373-956 (Area Code & Daytime Tel	
Enclosed is a check for the following amount:		
□\$35 Filing Fee	☐\$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 P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301



May 25, 2006

ROBINSHORE RENOVATION AND CUSTOM HOMES, INC. 5800 NW 39 AVE STE 101 GAINESVILLE, FL 32606-6972

SUBJECT: ROBINSHORE RENOVATION AND CUSTOM HOMES, INC.

Ref. Number: P99000085719

We have received your document for ROBINSHORE RENOVATION AND CUSTOM HOMES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6927.

Letter Number: 806A00036799

Tracy Smith Document Specialist

Articles of Amendment to Articles of Incorporation of

ROBINSHORE RENOVATION AND CUSTOM HOMES, INC.

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

TO SECRET AND
TALLAHARY OF ON 44
THASSEE FISTAT
TALLAHASSEE FLORIDA

P99000085719

(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:

NEW CORPORATE NAME (if changing):

ROBI	NSON RENO	VATION .	AND CU	STOM	HOMES	, IN	C.		•		
(Must contain the (A professional co											.")
AMENDMEN' and/or Article T									e Articl	e Number	(s)
Change of	address	from:	5800	NW	39th	Ave	nue, S	Suite	101		
9			Gaine	esvi	.lle,	FL	32606	5	4		_
Change add	ress to:		3921	NW	97th	Bou.	levaro	i, Su	ite 2	01	_
			Gaine	esvi	lle,	FL	32606	5			_
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		(Attach ac	ldition	al pages	if neces	ssary)				_
If an amendmer for implementir											
N/A											
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(continued)

The date of each amendment(s) adoption:
Effective date if applicable: June 1, 2006
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
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)
E. Scott Robinson
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35