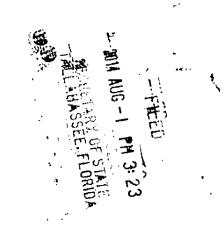
753591

(Re	questor's Name)	
(Ade	dress)	
		
(Add	dress)	
(City	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	



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Office Use Only

X00789, 00534, 00677, 00534

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: OS Co	ndominium Association, Inc.
DOCUMENT NUMBER: 75 35 9/	
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
Marilyn A- R	i q erman
(Nan	ne of Contact Person)
(Firm/ Company)
200 North Fire	st Street
	Florida 3283/ / State and Zip Code)
E-mail addless: (to be used for fi	uture angual report notification)
For further information concerning this matter, please call:	•
Marilyn A-Rigerman (Name of Contact Person)	at (32/) > 54- 13 F > (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:
(A	3.75 Filing Fee & Status critified Copy Certificate of Status dditional copy is Certified Copy calcolored) (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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 21, 2014

Marilyn A. Rigerman 200 North First Street Cocoa Beach, FL 32831

SUBJECT: O S CONDOMINIUM ASSOCIATION, INC.?

Ref. Number: 753591

We have received your document for O S CONDOMINIUM ASSOCIATION, INC.? and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is 748795.

Please accept our apology for failing to mention this in our previous letter.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 314A00015635

RECEIVED

14 AUG - L AMII: 05



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2014

Marilyn A. Rigerman 200 North First St Cocoa Beach, FL 32931

SUBJECT: O S CONDOMINIUM ASSOCIATION, INC.?

Ref. Number: 753591

We have received your document for O S CONDOMINIUM ASSOCIATION, INC.? and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above corporation is a Florida non profit corporation and the form submitted is for a foreign (out of state) corporation. I have enclosed the correct form for you to fill out and return to us.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 114A00013961

HECEIVED

4 JUL 18 MITT: 21

DEFARCTED TO SAME
DIVISION OF COMPANIONS
TALLAMASSIFUL OR OR OR

Articles of Amendment to Articles of Incorporation

·FILED

(Name of Corporation as currently file	led with the Florida Dept, of Stat	
	75359,	TAILLAHASSEE: FLORID
(Documer	nt Number of Corporation (if know	/n) ************************************
Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:		t For Profit Corporation adopts the following
A. If amending name, enter the new name of	of the corporation:	
Ocean Sands Condoname must be distinguishable and contain the	ominium Assoc	iction of Brevard the new
name must be distinguishable and contain the	word "corporation" or "incorpor	rated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the	<u>name</u> .	
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		
(Trincipul office unuress <u>most out tistee</u>		
	· 	
C. Enter new mailing address, if applicable	۵۰	
(Mailing address MAY BE A POST OFF		
5 Ta		the season of the
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Flor	ida, enter the name of the
Name of New Registered Agent:		
	(Florida street addres	(2
New Registered Office Address:		
 -	(City)	, Florida(Zip Code)
		(Zip Coae)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	zing Registered Agent: Lagent Lam familiar with and ac	cent the obligations of the position.
The coy decept the appointment as registered	age I am jammin trim and de	
Si	ignature of New Registered Agent,	if changing

Page 1 of 4

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 = 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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add		•	
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Charre			
6) Change			
Add			
Remove			

E. If amending or adding additional Art	icles, enter change(s) here:	
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
,		
		·····
	•	

date this document was signed.	, if other than the
Effective date if applicable: 5-1-2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Signature Juny Day on By	
	
(By the Mairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or	
other court appointed fiduciary by that fiduciary)	
Larry Baggerly (Typed or printed have of person signing)	
Vice President	
(Title of person signing)	