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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

NAME OF CORPORATION: NAUTICA CONDINANUM ASSECIATION INC

DOCUMENT NUMBER: NO 400000 4190 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: WILLAM WEBSTER (Name of Contact Person) NAUTICA CONDOMINIUM (Firm/ Company) 5790 INDIAN CREEK DRIVE (Address) MIAMI BEACH FL 33140
(City/ State and Zip Code) william, webster @fsresidential.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BILL WEBSTEL at 786 246-7302 (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: \$35 Filing Fee \$\Bigs\\$43.75 Filing Fee & \Bigs\\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Articles of Amendment

| | to | | |
|---|---------------------------------|-------------------------------|---------------|
| Article | s of Incorporation | | |
| Nautica Condominium | ASSOCIA | 400, Inc. | |
| NOT CONTROL (Name of Corporation as curren | itly filed with the Flori | da Dept. 61 State) | |
| (Document Numb | per of Corporation (if kn | own) | |
| Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation: | es, this <i>Florida Not For</i> | Profit Corporation adopts | the following |
| A. If amending name, enter the new name of the corporat | <u>ion:</u> | | |
| | | | The new |
| name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name. | tion" or "incorporated | " or the abbreviation "Corp | or "Inc." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS |) | | |
| | , | | a |
| | | <u> </u> | • |
| | | <u> </u> | |
| C. Enter new mailing address, if applicable: | | ; - | 13 |
| (Mailing address MAY BE A POST OFFICE BOX) | | <u> </u> | (4) |
| | | : | - |
| | | <u> </u> | |
| | | Ti in | ٠ ري |
| | | | |
| D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a | | enter the name of the | |
| | | | |
| Name of New Registered Agent: | | | |
| | (Florida street address) | | |
| New Registered Office Address: | | | |
| | | , Florida | |
| | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa | | he obligations of the positio | on. |

Signature of New Registered Agent, if changing

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: XChange X Remove X Add | <u>V</u> <u>Mike</u> | t Doe e Jones y Smith | |
|---------------------------------|----------------------|-----------------------------|----------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u>582</u> | KAREN OLIN | 919 OAK PARK AV |
| Add _ _X Remove | | | OAK PARK 16 60304 |
| 2) Change | SEC | MARCIA JAES | 5790 INDIAN CREEKDR |
| X Add | | | MUNIT 403 |
| Remove | | | MIAMI BEACH FL 33140 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or addir ttach additional shee | ets, if necessary). | (Be specific) | ! | | | |
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| | e date of each amendment(s) adop this document was signed. | tion: 3///20/7 | , if other than the |
|-----|---|---|---------------------------------------|
| | ective date <u>if applicable</u> : | 5/1/2017 | |
| | | (no more than 90 days after amendment file date) | |
| | te: If the date inserted in this block urnent's effective date on the Depar | does not meet the applicable statutory filing requirements, tment of State's records. | this date will not be listed as the |
| Λdι | option of Amendment(s) | (CHECK ONE) | |
| Ų | The amendment(s) was/were adop was/were sufficient for approval. | ted by the members and the number of votes cast for the ar | mendment(s) |
| | There are no members or members adopted by the board of directors. | s entitled to vote on the amendment(s). The amendment(s) |) was/were |
| | Dated | 1AY 17 2017 | |
| | Signature | Welling L Welson | |
| | (By the chairma have not been s | n or vice chairman of the board, president or other officer- selected, by an incorporator – if in the hands of a receiver, jointed fiduciary by that fiduciary) | |
| | | WILLIAM L. WEBSTER | |
| | | (Typed or printed name of person signing) | |
| | | PLOPERTY MANAGER (Title of person signing) | |
| | | (Title of person signing) | · · · · · · · · · · · · · · · · · · · |