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AMUNA: 11.25,14

## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Queens H	larbour Yac	cht Club, Inc.
DOCUMENT NUMBER: N1400002	706	
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Frank E. Proctor, Directo	or	
	(Name of Contact Person	n)
Queens Harbour Yacht (	Club, Inc.	
	(Firm/ Company)	
834 Shipwatch Dr. East		
	(Address)	
Jacksonville, FL 32225		
	(City/ State and Zip Cod	e)
frank.proctor@ho		
E-mail address: (to be used	•	notification)
For further information concerning this matter, please		
Frank Proctor	<sub>at (</sub> 904	619 8171
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	urtment of State:
■ \$35 Filing Fee		□\$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	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

74.	
14 NOV 17 PM 4:	

Queens Harbour Yacht C	lub, Inc.	My L	
(Name of Corporation as currently	filed with the Florida Dept. of State	· · · · · · · · · · · · · · · · · · ·	٠,
N14000002706			
(Docum	nent Number of Corporation (if known	)	
rsuant to the provisions of section 617.10 nendment(s) to its Articles of Incorporation		For Profit Corporation adopts the fo	llov
If amending name, enter the new nam	e of the corporation:		
			he.
me must be distinguishable and contain to Company" or "Co." may not be used in the		ed" or the abbreviation "Corp." or	"In
Enter new principal office address, if			
rincipal office address <u>MUST BE A STR</u>	REET ADDRESS )		
	<del></del>		
Enter new mailing address, if applica	ble:		
(Mailing address MAY BE A POST OF			
	<del></del>		
If amending the registered agent and/	or registered office address in Florid	o enter the name of the	
new registered agent and/or the new r		a, enter the dame of the	
	· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:			
_		<u> </u>	
New Registered Office Address:	(Florida street address)		
	(2)	, Florida	
	(City)	(Zip Code)	
w Registered Agent's Signature, if cha wereby accept the appointment as register		pt the obligations of the position.	
	Signature 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	V Mik	n Doe te Jones ty Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Nick Simonis	1502 Harrington Pk. Dr
Add			Jacksonville, FL 32225
X Remove			
2) Change	D	Gary Bone	943 Yacht Harbor Ct
X Add			Jacksonville, FL 32225
Remove	Б	Pohin Spansa	12612 Emerald Cove Ct
3) Change	<u>D</u>	Robin Spence	13612 Emerald Cove Ct Jacksonville, FL 32225
X Add Remove			Jacksonvine, I L 32223
4) Change			
Add			
5) Change			
Add			
6) Change			
Add			
Remove		D	

attach additional sheets, if necessary).	rticles, enter change(s . , (Be specific)			
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The	date of each amendment(s) adoption: Sept 24, 2014	, if other than the
date	this document was signed.	
Effe	ective date <u>if applicable</u> :	<del></del>
	(no more than 90 days after amendment file date)	
Ada	option 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.	
	November 12, 2014	
	Signature	
	(By the chairman 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)	
	Mort Crim Most Cring	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	