## 706653

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: OCERN PRIVE Manor Condominium Inc
DOCUMENT NUMBER: 706653 FEI/EIN#: 59-1052463
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bruton, Malcolm S (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
6520 N. Ocean Blue - Unit 3
(Address)
O Cean Ridge FL 33435 (City/ State and Zip Code)
rebeccabruton @ icloud, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call:    Malcolm Bruton   at (501) 706-34   5   11   12   12   13   14   15   15   15   15   15   15   15
(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:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section  Division of Corporations Division of Corporations

Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

· . . .

(Name of Corporation as currently filed with the Florida	Dept. of State)
70665	3
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	
Name of New Registered Agent:	n/4
<u>New Registered Office Address</u> :	(Florida street address)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position. $\frac{1}{2}$
	ignature 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: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u> </u>	Acres, nicole	(1520 M. Olean BIVI - Unit 28 (Yean RIGGT, FL 33435
Remove  2) Change Add	VP	Turo, julian	4520 M. Caean Blud - unit 3 Ocean Ridge, FL 33435
Remove 3) Remove Change Add	ST	Bruton, Rebella	Ocean Kity, FL 33475
Remove 4) Change Add	ST	Frasc, Rebella	6520 n. Olean Blvd-Unit 6 Clean Didge, fr 33435
Remove			
5) Change Add	<del></del>		38 CR U
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	7

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2021 JUN 24 SECRETARE
The state of the s
The date of each amendment(s) adoption:, if other than the
The date of each amendment(s) adoption:, if other than the date this document was signed.
1. Lulamin
Effective date if applicable:
(no more than 90 days after amenament file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.

here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
Dated 10/14/2024
Signature Reliter Flore
(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)
Rebecca frase
(Typed or printed name of person signing)
Secretary + Treasurer
(Title of person signing)

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