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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Blue bevry Bay Recreation ASSOCIATION 727 430 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Denise Mathews Blueherry Bay Rowaton Association
(Firm/Company) 11931 NE 205m Terr WALDU FL 32654
(City/ State and Zip Code) Coeprodmathhews e. G. Mail, Com For further information concerning this matter, please call: enise Mathews at 35 706 340 377 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: D\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed)

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) Blue Kerry Bay Reveation Association, (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: NA A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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		Doe : Jones · Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	P_	Lieba Govin	POBOX 566 EARLETON, PL 3263
Remove 2) Change Add	<u>p</u> _	Keith Govin	PO BOX 566 EARLETON, FL 32631
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional she		rticles, enter change(s) here: i. (Be specific)	
			2

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		-	
The date of each amendment(s) adoption: date this document was signed.	A pril	3,2020	, if other than the
Official district districts	A 1	4 1-20	
Effective date <u>if applicable</u> :	nore than 90 dans	after umendment file dates	
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Note: If the date inserted in this block does a document's effective date on the Department		ble statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s) (9	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.				
Dated MAYE 2020				
Signature Deniel Meethers Secretary (By the chairman or vice chairman of the board, president or other officer of directors				
(By the chairman or vice chairman of the board, président or other officer of directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
TENISE MATTHEWS (Typed or printed name of person signing)				
Secretary (Title of person signing)				