729134

(Re	equestor's Name)	
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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	- #\
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COVER LETTER

TO: Amendment Section
Division of Corporations

Palm Beach Mariti NAME OF CORPORATION:	me Meuseum, Inc.		
729734 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sui	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Melissa Gross-Amold			
	(Name of Contact Pe	erson)	
Amold Law Firm			
	(Firm/ Company	<i>(</i>)	
6279 Dupont Station Court			
	(Address)		
Jacksonville, FL 32217			
	(City/ State and Zip (Code)	<u> </u>
melissa@arnoldiawfirmllc.com			
E-mail address: (to be use	ed for future annual rep	ort notification)
For further information concerning this matter, pleas	æ call:		
Melissa Gross-Arnold		904	731-3800
(Name of Contact Perso	on) at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	sayable to the Florida I	Department of S	itate:
■ \$35 Filing Fee		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

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

Articles of Amendment to Articles of Incorporation of

18 HAR 28 AH II: 3●

Palm Beach Maritime Museum, Inc.		
(Name of Corporation	as currently filed with the Florida Dent. of St	Rte)
729734		
(Docu	nent Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Profit Corpor</i> e	ation adopts the following
A. If amending name, enter the new name of th	corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	.	The new iation "Corp." or "Inc."
B. <u>Enter new principal office address, if applice</u> (Principal office address <u>MUST BE A STREET A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
D. If amending the registered agent and/or registered agent and/or the new register	tered office address in Florida, enter the name ed office address:	of the
Name of New Registered Agent:	Marie Turchiaro 1518 West Lantana Road	
New Registered Office Address:	(Florida strees address)
		Florida 33462
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	(City) Legistered Agent: 1. I am familiar with and accept the obligations of New Registered Agent, if Ch	3/13/18

Page i 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	PT John V Mike SV Sally	Doe Jones Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>T</u>	Steve Bolin	8502 Chapman Oak Court
Add			Palm Beach Gardens, FL 33410
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			_
Remove			
6) Change			
6) Change	*		
Add			

Lifamending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
					
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The date of each amendment(s) ad date this document was signed.	option:	if other than the
J		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of director Dated	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
(By the chair have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator — if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Andrew	C. Binns	
	(Typed or printed name of person signing)	
Chairma	n	
	(Title of person signing)	