731044

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ALLAHASSEE. FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Clear water key Southbeachell
DOCUMENT NUMBER: 731044
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KIZK Bliss (Name of Contact Person)
(Name of Contact Person)
COMMUNITY MANAGEMENT CONCEPTS (Firm/Company)
4585 140Th AUE N. SUJTE 1012 (Address)
(Address)
CLEARWATER, PL 33762 (City/State and Zip Code)
(City/ State and Zip Code)
DASOLARTE @ CMC FLA. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CIRIC BUISS at (727) 535 - 2424 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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 U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Clearwater Key associa-	tion-South Be	each II, Inc
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
731044		
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporat	tion adopts the following
A. If amending name, enter the new name of the corporati	ion:	
N/A		The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbrevia	ttion "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</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 office new registered agent and/or the new registered office a	ce address in Florida, enter the name ddress:	of the
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
(City)	, Florida	(e)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		f the position.
	UIN	-
Signature of New Regist	tered Agent, if changing	
ı	Page 1 of 4	Acc 2

TILLUN 22 P 12: 27
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
<u>Sec</u>	Mary Ailabouri	1430 GUIF BIVD# 602 Cleanuaky Beach FC 33767	Add _ Remove
DIR	John Sakoutis	1430 GUIF Blud # 102 Clearwater Beach PL	Add Remove
DIR	Nick V.tsilatos	1430 GUIF Blud # 403 Cleanwater Beach RL 33767	Add Remove
DIR	Shirley Sehnettle	CIENTINATER BEACH FL	Add Remove
			Add Remove
·			Add Remove
D. If amendi	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)	
			_
			_
Dated	· · · · · · · · · · · · · · · · · · ·		
<u>-</u>	Signature of a member of	or authorized representative of a member	
-	Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
	
	
	
	
	
	
	

Effective date if applicable:

(no more than 90 days after amendment file date)

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.

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

Signature

By the chairman or tipe 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)

Will Bliss

(Typed or printed name of person signing)

President a CEO

(Title of person signing)