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C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

CAPTAIN'S KEY PROPERTY OWNERS, INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUNES CHRISTINE (Name of Contact Person) (Firm/Company) 12101 (City/State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christine C. Junes at 561 693 -8017 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



2018 SEP 22 AM 10: 50 PROPERTY OWNERS (Name of Corporation as currently filed with the Florida Dept. of State) (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: A. If amending name, enter the new name of the corporation: 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: Florida (City) (Zip Code) 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>P</u>	O'NEILL , JUSEPH W	12071 CAPTAINS LNDG N.PALM BEACH, FL 33408
2) Change Add Remove	<u>P</u>	GRETTA CURRY	12150 CAPTAINS LNDG N. PALM BEACH, FL 33408
3) Change Add Remove	VP	O'NEILL, JOSEPH L	
4) Change Add Remove	<u>VP</u>	MANJU GEORGE	12204 CAPTAINS LNDG. N. PALM BEACH 33408
5) Change Add Remove	<u>S</u>	WILSON, DWIGHT	N. PALM BEACH, FL 33408
6) Change Add Remove	<u>S</u>	CHRISTINE C. JINE	S 12101 CAPTAINS LNDG N. PALM BEACH, FL 33408

utach additional sheets	i, if necessary).	ticles, enter change(s (Be specific)			
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The date of each amendment(s) a	doption: 4/14/16		if other than the
date this document was signed.		THET SELECTARY SIVISION OF CO	III UF GIANI
Effective date if applicable:	6/19/16	มเพียงหั <i>ย</i> ที่ ยักใช้	REORATION
	(no more than 90 days after amendment file date)	2016 SEP 22	AM 10: 58
Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicable statutory filing requirement epartment of State's records.	ts, this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the ral.	amendment(s)	
☐ There are no members or men adopted by the board of direct	abers entitled to vote on the amendment(s). The amendment tors.	(s) was/were	
Dated	7/19/11		
Signature			
have not be	irman or vice chairman of the board, president or other office een selected by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)		_
	CHRISTINE C JONES (Typed or printed name of person signing)		
	SECRETARY (Title of person signing)		