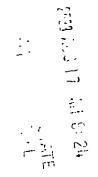


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





08/17/23--01005--024 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Ocean Beach Villas ON:	Condominium Associ	aton, Inc.		
DOCUMENT NUMBER:	749381				
The enclosed Articles of An		mitted for filing.			
Please return all correspond	ence concerning this man	ter to the following:			
Steve Harrington					
		(Name of Contact Pe	Ton)		
Ocean Beach Villas Condo	minium Association, Inc.				
		(Firm/ Company)		-
320 N Atlantic Ave #3A					
		(Address)			
Cocoa Beach, FL 32931					
		(City/ State and Zip (Code)		
steveharrington@cfl.π.com	1				
	-mail address: (to be use	d for future annual rep	ort notification	on)	
For further information con-	cerning this matter, please	e call:			-7
Steve Harrington		at	321	759-5533	one Number)
1	(Name of Contact Person		(Area Code)	(Daytime Teleph	one Number),
Enclosed is a check for the	following amount made p	ayable to the Florida I	epartment o	f State:	· : = =
☐ \$35 Filing Fee	≅\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certi Certi (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)	THE CATE

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

Articles of Amendment to Articles of Incorporation of

Ocean Beach Villas Condominium Association, Inc	c.				
Name of Corporation as currently filed with the	Florida I	Dept. of State)	· <u></u> -		
749381					
(Docum	ent Numb	er of Corporation (if I	known)	<u> </u>	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statuts	cs, this <i>Florida Not F</i>	or Profit Corp	poration adopts the	following
4. If amending name, enter the new name of the	corporat	don:			
					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporate	ed" or the abb	reviation "Corp." o	
B. Enter new principal office address, if applical	hla	320 N Atlantic Ave	#3A		
(Principal office address MUST BE A STREET ADDRESS)		Cocoa Beach, FL 3	2931		
		· · · · · · · · · · · · · · · · · · ·			
C. Enter new mailing address, if applicable:		320 N Atlantic Ave	#3A		-
(Mailing address MAY BE A POST OFFICE)	3 <i>0X</i>)				
		Cocoa Beach, FL 33	2931 		_
D. If amending the registered agent and/or regis	ered offi	an address in Florid			
new registered agent and/or the new registered	ed office a	iddress:	w' effec ins or	ime of the	
Name of New Registered Agent:	Steve Hai	rrington			
	320 N At	lantic Ave #3A			
		(Florida street add	ress)	
New Registered Office Address:	a 5				
	Cocoa Be	······································		, Florida	<u> </u>
		(City)		(Zip Code)	•
New Registered Agent's Signature, if changing R hereby accept the appointment as registered agent			ot the obligation	ons of the position.	
	,-	501			ع النبر ج
		MATE		4	<u>3//9/</u>
-	S	ignature of New Regi	stered Agent, i	j cnanging	٠

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 De Y Mike Jo SV Sally Se	ones .	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	PVD	Jeffery W Wells	1415 N Atlantic Ave Cocoa Beach, FL 32931
x Remove 2) Change Add	PVD	Steve Harrington	320 N Atlantic Ave #3A Cocoa Beach, FL 32931
x Remove 3) Change Add Remove	STD	Teeraporn Wells	1415 N Atlantic Ave Cocoa Beach, FL 32931
4) Change × Add	STD	Lee D. Harrington	320 N Atlantic Ave #3A Cocoa Beach, FL 32931
Remove 5) Change A.dd			CH 10 10 10 10 10 10 10 10 10 10 10 10 10
Remove 6) Change Add			
Remove E. If amending or additional sheep		icles, enter change(s) here: (Be specific)	
	<u> </u>		

			····		
		- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
					<u>_</u>
					
	<u>.</u>				
		_			
					
		· · · · · · · · · · · · · · · · · · ·			
					
		•			
	·	 	· · ·		
					
					2623 AUG
					21 8: 24 25: 54 25: 71
					116 G
					F 45
The date of each amendment(s) adoptio date this document was signed.	n;				_, if other than the
Effective date if applicable:					
	(no more than 90	days after amen	dment file date)	-	
Note: If the date inserted in this block document's effective date on the Department	es not meet the ap ent of State's reco	plicable statutor; ords.	y filing requireme	ents, this date will not	be listed as the
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 memi adopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	August 10, 2023
Signature (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)
	Jeffery W Wells
	(Typed or printed name of person signing)
	President
	(Title of person signing)