## 149580

| (Requestor's Name)  |
|---|
| (Address)   |
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| (City/State/Zip/Phone #)  |
| PICK-UP WAIT MAIL   |
| (Business Entity Name)  |
| (Document Number)   |
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JUN 15 2012 T. ROBERTS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION:   | ondominium Associ  | ation of Satellite Beach, Inc.  |
|--|--|---|
| DOCUMENT NUMBER: 749580  |  |   |
| The enclosed Articles of Amendment and fee are sui   | bmitted for filing.  |   |
| Please return all correspondence concerning this mat   | tter to the following:   |   |
| Robert Williams  |  |   |
|  | (Name of Contact Perso   | n)  |
| Williams Property Mana   | gement, Inc  |   |
|  | (Firm/ Company)  |   |
| 1694 Trimble Road  |  |   |
| -  | (Address)  |   |
| Melbourne, Florida 3293  | 34   |   |
|  | (City/ State and Zip Cod   | e)  |
| williamswalk@ya  |  |   |
|  | ed for future annual report  | notification)   |
| For further information concerning this matter, please   | e call:  |   |
| Robert Williams  | <sub>at</sub> 321  | 960-4370 Dede & Daytime Telephone Number)   |
| (Name of Contact Person)   | (Area Co   | ode & Daytime Telephone Number)   |
| Enclosed is a check for the following amount made p  | ayable to the Florida Depa   | artment of State:   |
| \$35 Filing Fee \$\text{Certificate of Status}\$   | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status ·Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address ment Section n of Corporations Building xecutive Center Circle                  |

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Flo   | N ASSOCIATION OF SATECITE BEACH, I                               |
|--|--|
| 749580   |  |
| (Document Number of Corpor   | ration (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 Corporation adopts the following |
| A. If amending name, enter the new name of the corporat  | iion:  |
|  | The new  |
| name must be distinguishable and contain the word "corpora<br>"Company" or "Co." may not be used in the name.          | ntion" or "incorporated" or the abbreviation "Corp." or "Inc."   |
| 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)                                | PO Box 372687  |
|  | Satellite Beach, Florida 32937                                   |
| 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 of the                     |
| Name of New Registered Agent:  |  |
| New Registered Office Address:   | (Florida street address)   |
|  | , Florida  |
| (City)   | (Zip Code)   |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan |  |
| Signature of New Regis   | tered Agent, if changing   |

Page 1 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 <math>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             | <u>PT</u>    | John Doe         |  |
|-------------------------------|--------------|------------------|--|
| X Remove                      | <u>v</u> .   | Mike Jones       |  |
| X Add                         | <u>sv</u>    | Sally Smith      |  |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s                          |
| Change  X Add  Remove         | <u>v</u>     | Virginia Massoni | PO Box 372687 Satellite Beach, Fl. 32937 |
| 2) Change Add Remove          |              |                  |  |
| 3 ) Change Add Remove         |              |                  |  |
| 4) Change<br>Add<br>Remove    |              | <del>.</del> .   |  |
| 5) Change<br>Add<br>Remove    |              |                  |  |
| 6) Change<br>Add<br>Remove    |              | -                |  |

| attach additional sheets, if necessary). | icles, enter change(s) h<br>(Be specific) |                |   |
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| The date of each amendment(s) adoption: 6-7-12 |  |  |  |
|--|--|--|--|
| Effective date if applicable:                  |  |  |  |
| •  | (no more than 90 days after amendment file date)   |  |  |
| Adoption of Amendment(                         | (s) ( <u>CHECK ONE</u> )   |  |  |
| The amendment(s) was was/were sufficient fo    | as/were adopted by the members and the number of votes cast for the amendment(s) or approval.  |  |  |
| There are no members adopted by the board      | s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.   |  |  |
| Dated  | Q/8/13/10/10/10/10/10/10/10/10/10/10/10/10/10/   |  |  |
| (By  | the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary) |  |  |
|  | Roban lo Cura  |  |  |
|  | (Typed or printed name of person signing)  |  |  |
|  | (Title of person signing)  |  |  |