

757 464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

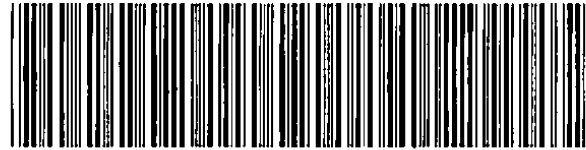
(Business Entity Name)

(Document Number)

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COVER LETTER

: Amendment Section
Division of Corporations

ME OF CORPORATION: Atlantis III by The Sea Condominium Association, Inc.

DOCUMENT NUMBER: 757464

: enclosed *Articles of Amendment* and fee are submitted for filing.

ase return all correspondence concerning this matter to the following:

an Sposato

(Name of Contact Person)

chid Island Management Group

(Firm/ Company)

D. Box 643428

(Address)

ro Beach FL 32964

(City/ State and Zip Code)

o@orchidislandgroup.com

E-mail address: (to be used for future annual report notification)

· further information concerning this matter, please call:

an Sposato

772

321-3453

at

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

closed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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

Atlantis III by The Sea Condominium Association, Inc.

Name of Corporation as currently filed with the Florida Dept. of State)

7464

(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:

If amending name, enter the new name of the corporation:

The new 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.

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 643428

Vero Beach FL 32964

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:

Ross, Earle, Bonan, Ensor & Carrigan, P.A.

819 SW Federal Hwy Suite 302

(Florida street address)

New Registered Office Address:

Stuart

(City)

Florida 34994

(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

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name,
l address of each Officer and/or Director being added:

(attach additional sheets, if necessary)

ase note the officer/director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief
ecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office
d. President, Treasurer, Director would be PTD.

anges 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
hange, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change,
ke Jones, V as Remove, and Sally Smith, SV as an Add.

ample:

Change	PT	John Doe
Remove	V	Mike Jones
Add	SV	Sally Smith

Type of Action (check One)	Title	Name	Address
<input checked="" type="checkbox"/> Change	P	Fred Hein	c/o Orchid Island Mgmt Group
<input type="checkbox"/> Add			P.O. Box 643428
<input type="checkbox"/> Remove			Vero Beach FL 32964
<input checked="" type="checkbox"/> Change	V	Linda Weinberg	c/o Orchid Island Mgmt Group
<input type="checkbox"/> Add			P.O. Box 643428
<input type="checkbox"/> Remove			Vero Beach FL 32964
<input checked="" type="checkbox"/> Change	T	Daniel Braccioldieta	c/o Orchid Island Mgmt Group
<input type="checkbox"/> Add			P.O. Box 643428
<input type="checkbox"/> Remove			Vero Beach FL 32964
<input checked="" type="checkbox"/> Change	S	Thomas Jicha	c/o Orchid Island Mgmt Group
<input type="checkbox"/> Add			P.O. Box 643428
<input type="checkbox"/> Remove			Vero Beach FL 32964
<input checked="" type="checkbox"/> Change	D	Richard Wells	c/o Orchid Island Mgmt Group
<input type="checkbox"/> Add			P.O. Box 643428
<input type="checkbox"/> Remove			Vero Beach FL 32964
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

If amending or adding additional Articles, enter change(s) here:

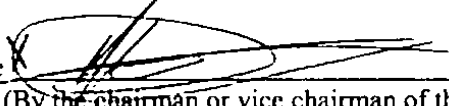
(attach additional sheets, if necessary). (Be specific)

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 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)

FREDERICK HEIN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)