781472

	V	,
(Red	uestor's Name)	
(Add	lress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
	•	
		i

Office Use Only



500310874435

03/23/18--01016--001 **35.00

18 HAR 23 PN 4: 03

MAR 26 2017 S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

, NAME OF CORPORATION:	Mariner Sands Club	Villas Association	, Inc.			
761- DOCUMENT NUMBER:	472					
The enclosed Articles of Amend	ment and fee are subm	nitted for filing.				
Please return all correspondence	concerning this matter	r to the following:				
Stephanie Harris						
		(Name of Contact	Person)			
Signature Property Managemen	, LLC					
		(Firm/ Compa	iny)			
459 NW Prima Vista Blvd						
		(Address)				
Port St Lucie, FL 34983						
	((City/ State and Zi	p Code)			
stephanie@signaturepropertymg	mt.com					
E-ma	address: (to be used	for future annual r	report notific	cation)	
For further information concerning	ng this matter, please o	call:				
Stephanie Harris			772 at		219-4474	
(Na	ne of Contact Person)		(Area Co	ode)	(Daytime Telephone Number)	
Enclosed is a check for the follow	ving amount made pay	able to the Florida	a Departmer	nt of S	State:	
	\$43.75 Filing Fee & 【 Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	y is (Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Addr	ess	5	street Addr	ess		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Mariner Sands Club Villas Association, Inc

(Name of Corporation as c	currently filed with the Florida Dept. of State)		
761472 761472			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation ado	pts the fol	llowing
A. If amending name, enter the new name of the cor	poration:		
name must be distinguishable and contain the word "co	orporation" or "incorporated" or the abbreviation "C		he new "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 ADDI			
	·		
	· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	υ		
		777	
			
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the		SHE
new registered agent and/or the new registered o		(7) (1) (1)	23
Name of New Registered Agent:		<u></u>	~
			÷.
New Registered Office Address:	(Florida street address)		
<u> </u>	, Florida, City) (Zip Co		
	(City) (Zip Co	de)	
New Registered Agent's Signature, if changing Regist the appointment as registered agent. I		sition.	
	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: _X_Change _X_Remove _X_Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) XX Change	P	Susan Wisor	3232 SE Dixie Hwy
Add			Unit B
Remove			Stuart, FL 34997
2) XX Change	<u>T</u>	Al Pasternak	3232 SE Dixie Hwy
Add			Unit B
Remove			Stuart, FL 34997
3) XX Change	S	Bonnie Morrow	3232 SE Dixie Hwy
Add			Unit B
Remove			Stuart, FL 34997
4) Change	D	Julie Clough	3232 SE Dixie Hwy
XX Add			Unit B
Remove			Stuart, FL 34997
5) Change	VP	Toni Mulle	3232 SE Dixie Hwy
XX Add	-		Unit B
Remove			Stuart, FL 34997
6) Change			
Add			
Remove			

f amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
	<u> </u>
	· · · · · · · · · · · · · · · · · ·
	

Feb 20, 2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective John Committee Live	
Effective date if applicable: (no more than 90 days after amendment file date)	<u> </u>
(no more man 20 days after amenament file daily)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r	not be listed as the
document's effective date on the Department of State's records.	
Adaption of Association (OHEOV ONE)	
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.	
AND ADDRESS OF THE PARTY OF THE	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were	
adopted by the board of directors.	
20 February 2018	
Dated	
Signature Such Sura	
(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)	
Susan Wisor SUSAN S. WISOR	
(Typed or printed name of person signing)	
President	
(Title of person signing)	
(· · · · · · · · · · · · · · · · · · ·	