# 705655

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SECKETARY OF STATE

Joseph Jo

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Ocean Cove Home of	owner's Associátion, Inc.
DOCUMENT NUMBER: 765655	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	ıg:
Elizabeth Lynch (Name of Contact Person)	
(Name of Contact Ferson)	
(Firm/ Company)	
150 Ocean Cove Dry (Address)  Jupiter FL 334  (City/ State and Zip Code)	17
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, please call:	
Elizabeth Lynch at (56) (Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Floring	rida Department of State:
■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Cop (Additional or enclosed)	py Certificate of Status
Amendment Section Amendment Section Division of Corporations Division P.O. Box 6327 Cliffo	et Address Industrial

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVI.

2010 AUG 16 AM 8: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 4, 2010

ELIZABETH LYNCH 150 OCEAN COVE DRIVE JUPITER, FL 33477

SUBJECT: OCEAN COVE HOME OWNERS' ASSOCIATION, INC.

Ref. Number: 765655

We have received your document for OCEAN COVE HOME OWNERS' ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 910A00018716

## Articles of Amendment

Articles of Amendment to Articles of Incorporation of Cove Homeowner's Association Jackson Jac				
Articles of Amendment				
to				
Articles of Incorporation of Am.				
A 7 19 10: 5				
Ocean Cove Homeowner's Association, Like				
(Name of Corporation as currently filed with the Florida Dept. of State)				
765695				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. 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.				
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: Elizabeth Lynch				
New Registered Office Address: (Florida street address)				
Jupiter, Florida 33 477 (City), Florida (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.				

### If amending the Officers and/or Directors, enter the titre 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)

<u>Title</u>	Name	Address	Type of Action
JD.	Vilsen, Robert	17001 Freshwind Circle Jepeter (FL 334)7	☐ Add ☐ Kemove
PD	Galtere, Deborah	133 Ocean Cove Drike Jupiten, FL 33477	□ Add
TO	Elizabeth Lynch	130 Ocean Cove Dr. Tepiter, EL 33477	Add Remove
PD	Ann Cleveland	118 Ocean Cove. Dr.	VAdd
E. <u>If amending</u> (attach addit	g or adding additional Articles, enter clitional sheets, if necessary). (Be specific	hange(s) here:	,
<u>, w v</u>	A MALE AND A STATE OF THE STATE		
		W	
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The date of each amendment(s) ad	option;
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
•	(no more man 20 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were
Dated	70
Signature	ran Rossita
	nairman or vice chairman of the board, president or other officer-if directors
	been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
other cour	re appointed fiduciary by that fiduciary)
	JOAN Rossiter
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)

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