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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	MBR	Corporati	<u>0 20</u>	f C/ec	u wanter
DOCUMENT NUMBER:		•			
The enclosed Articles of Amendment	and fee are sub	mitted for filing.			
Please return all correspondence conce	rning this matte	er to the following:			
Gale	Fritz	(Name of Contact Perso	on)		
		(Firm/ Company)			
430 LarB	sood w	(Address)			· · · · · · · · · · · · · · · · · · ·
ClearWater	Beac	(City/ State and Zip Co	3 <u>3 76</u> de)	7	
GGF/ E-mail addr	Broker 2	I O C-M	. Com)	
For further information concerning this	matter, please	call:			
Gale Fritzlet	Contact Person) SE	321	739 0	843
Enclosed is a check for the following a				-	mone rumoer)
	5 Filing Fee & cate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street	Auare		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahaman FL 22314

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

	01	
MBR Corporation	of Claurwater	
	urrently filed with the Florida Dept. of State)	
7702	2/0	
	Number of Corporation (if known)	
Fursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	statutes, this Florida Not For Profit Corporation a	ndopts the following
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation	"Corp." or "Inc."
		. ** -
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR)	ESS) Clear Water F	ICLY #6
	Clear Water F	<u>33767</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	430 Lat Brand 11	# *
in thing the same same same same same same same sam	430 Car Board W Claur Walan F/	-
	Clark Wolar T/.	33767
D. If amending the registered agent and/or registered	office address in Florida, enter the name of the	. 19
new registered agent and/or the new registered off	fice address:	<u>.</u>
Name of New Registered Agent:	NA	<u> </u>
		-
***************************************	(Florida street address)	3
New Registered Office Address:	,	تت ن
	, Florida	, 0
 -	· · · · · · · · · · · · · · · · · · ·	Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
hereby accept the appointment as registered agent. I a		position.
	Signature of New Registered Agent, if changing	g

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 Doé, 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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address O
1) Change Add Remove	P Steve Buse ovski	430 Larbeard way #2 Clear Water 17. 33767
2) Change Add Remove	2 Suzanne Parsons	430 Los Board way #5 Clean with F1. 33767
3) Change Add Remove	T Dan Store	430 Car Board way #2 Clear with F1. 33767
4) Change Add Remove	T Gale Fritzler	430 Lat Board Way #6 Clear Water F.
5) Change Add Remove		
6) Change Add ::£emove		

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
NA	
	i.
	<u></u>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s 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 amendwas/were sufficient for approval.	ndment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	as/were
Dated 1-2-19 Signature Stud Oleus	
(By the chairman or vice chairman of the board, president or other officer-if d	
have not been selected, by an incorporator – if in the hands of a receiver, trus other court appointed fiduciary by that fiduciary)	stee, or
(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
(Title of person signing)	
(Title of person signing)	