## G35463

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(Aut	aress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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2020 AFR 20 PH 2: 5

EFFECTIVE DATE

May 1,2000

APR 3 0 2020 I ALBRITTON TO: Amendment Section

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Seaside Community Realty, Inc DOCUMENT NUMBER: 59-2294603 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gayle Pyle Name of Contact Person Seaside Community Development Corporation Firm/ Company POB 4730 Address Santa Rosa Beach, FL 32459 City/ State and Zip Code gpyle@seasidefl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gayle Pyle Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

**Mailing Address** 

**\$35** Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314

**☐\$**43.75 Filing Fee &

Certificate of Status

Street Address

**□\$43.75** Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

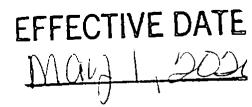
□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment Articles of Incorporation



Seaside Community Realty, Inc.		
(Name of Corporation as currently	v filed with the Florida Dept. of State)	·, <u> </u>
59-2294603		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "e "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must conta	ion "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
,		
		~
C. Francisco and decorate francisco de continuo de con		b20
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u> </u>
		27
		7 [1]
		= [
D. If amending the registered agent and/or registered office addr		2: 36
new registered agent and/or the new registered office address	<u>:</u> 	36
Name of New Registered Agent		<u></u>
(Florida str	eet address)	_
New Registered Office Address:	, Florida	
	(City) (Zij	o Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v		ı.
Signature of New R	egistered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	D	<del></del>	Jacky Barker	County Rd 30-A
Add X Remove				Seaside, FL 32459
2) Change	VP		Laurance Barton Davis, Jr.	2311 E. County Hwy, 30A
X Add				Santa Rosa Beach, FL 32459
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<del>_</del>		
Add				
Remove				
6) Change		_ <u>-</u>		
Add				
Remove				

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an amendment provides for an exchange or ovisions for implementing the amend (if not applicable, indicate N/A)	nge, reclassificat Iment if not con	ition, or can	icellation of ne amendme	issued shar ent itself:	es,	
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	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	May 1, 2020	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholde	er action and shareholder
	ere adopted by the shareholders. The number of votes cast for the amend were sufficient for approval.	ment(s)
	ere approved by the shareholders through voting groups. The following seed for each voting group entitled to vote separately on the amendment(s,	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
4/1 Dated	4/2020	
Signature _	By a director, presupply of the officer - if directors or officers have not	<del></del>
s	By a director, prescippies of the reflect of directors or officers have not elected, by an incorporator — if in the hands of a receiver, trustee, or other ppointed fiduciary by that fiduciary)	
	Robert S. Davis	<del></del>
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	