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(Rec	questor's Name)	
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Amend CC/ass

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SHELL HARBOUR RESORT INC

DOCUMENT NUMBER: J42715

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LLOYD H FALK

Name of Contact Person

LLOYD H. FAK, PA

Firm/ Company

600:SW 4TH AVENUE

Address

FORT LAUDERDALE, FL 33315

City/ State and Zip Code

Ifalklaw@bellsouth.net

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

For further information concerning this matter, please call:

Lloyd H Falk

...954

763-3231

Name of Contact Person

Area Code & Daytime Telephone Number

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

□ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

■\$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SHELL HARBOUR RESORT INC

SHELL HARBOUR RES	ORTING			_
(Name of Corporation a	s currently filed with the Florida	Dept. of State)	- "	
J42715				
, (Docume	nt Number of Corporation (if know	vn)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florid</i>	la Profit Corporation a	adopts the followin	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
:				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate. B. Enter new principal office address,	nation "Corp," "Inc," or "Co". nation," or the abbreviation "P.A." if applicable:	A professional corpor		
(Principal office address MUST BE A S	TREET ADDRESS)			
*			·	-
Si c				- 75 Egg
C. Enter new mailing address, if appl	icable:			SIGNO
(Mailing address MAY BE A POST	OFFICE BOX)			- ~ ~
				ω c ² 7
j.				
6.5 1				PM 1: 11
D. If amending the registered agent ar		Florida, enter the na	me of the	ਰ <u>ਦ</u> ੇ
new registered agent and/or the ne				·
Name of New Registered Agent	LLOYD H FALK		_	
	600 SW 4TH AVEN	1UE		
źş.	(Florida street ad	dress)		
New Registered Office Address:	FORT LAUDERDA	LE Florida	33315	
<u> </u>	(City)	, 1 101100	(Zip Code)	-
•				
;				
New Registered Agent's Signature, if c			<i>a.</i> 1	
I hereby accept the appointment as regis	tered agent. I am familiar with a	nd accept the obligation	ns of the position.	

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	\mathbf{PT}_{i}^{d} <u>J</u>	ohn Doe	
X Remove	<u>v</u> .	Mike Jones	
X Add	<u>sv</u> . <u>s</u>	Sally Smith	
	5 8		
Type of Action (Check One)	Title	<u>Name</u>	Address
(Check One)	$rac{h}{2}$.		
1) Change	PT	NANCY BRANNEN JOHNSON	221 TUMBLIN KLING ROAD
X Add			FT. PIERCE, FL 34982-6877
Remove	Ø.		
2) Change	t! P = #	RUSSELL T KOHUTH	140 SHELL HARBOUR ROAD
Add	51 51		SATSUMA, FL 32189
-x Remove	i _g		<u> </u>
3) Change	Ä.		
Add	**		
Remove	\hat{n}		
4) Change			
Add			
Remove	3 #		
	i.		
5) Change			
Add	7.		
Remove	; ;		
	•		
6) Change			
Add	•		
Remove			

If amending or adding as (attach additional sheets,)	if necessary).	(Be specific)	5, 11010.		
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If an amendment provid provisions for implement	es for an exch	ange, reclassificat	on, or cancellat	ion of issued sha	res.
(if not applicable, in	dicate N/A)	nament ii not cont	amed in the am	endment riseii.	
I/A	*				
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	<u>2.</u>	<u> </u>			,
	<u>;</u> ;		<u></u>	<u></u>	

The date of each amendment(s)	adoption: MAY 18, 2012
Effective date if applicable:	_
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required. The amendment(s) was/were a	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
action was not required. (C	,
Dated MAY	18. 2012
Dated	and Falk
	director, president or other officer if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
арро	
"	LLOYD H FALK / President
•	(Typed or printed name of person signing)
14 14	PERSONAL REPRESENTATIVE OF THE ESTATE OF RUSSELL THOMAS KOHUTH
	(Title of person signing)

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