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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	1
N01000000160 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
David Kelsey	
(Name of Contact Person)	
South Beach Hotel and Restaurant Association, Inc.	
(Firm/ Company)	
407 Lincoln Road #12H	
(Address)	· - ;
Miami Beach FL 33139	1
(City/ State and Zip Code)	1
sbhotels@bellsouth.net	1
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
David Kelsey 305 673-0440	
(Name of Contact Person) (Area Code) (Daytime Telephone Nu	mber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 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

(Name of Corporation as currently filed with the Florida De

South Beach Hotel and Restaurant Association (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: N/A If amending name, enter the new name of the corporation: N/A The new 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) 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: N/A New Registered Agent: N/A (Florido street address) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:		to Articles of Incorporation	
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The east accept the appointment as registered agent. I am jamiliar with and accept the obligations of the position.		Registered Agent:	
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	w Registered Agent's Signature, if changing Re ereby accept the appointment as registered agent.	t. I am familiar with and accept the obligations of the posi	tion.

Page 1 of 4

if amending the Office			each officer/director being removed and title, if	iame, an
	/director title i	by the first letter of the office title:	or; TR= Trustee; C = Chairman or Clerk; CEO	= Chief
Executive Officer; CF neld. President, Treas	O = Chief Fine	ancial Officer. If an officer/director ho	olds more than one title, list the first letter of each	office
Changes should be no a change, Mike Jones Mike Jones, V as Rem	leaves the corp	poration, Sally Smith is named the V an	isted as the PST and Mike Jones is listed as the V nd S. These should be noted as John Doe, PT as a	7. There i. 7 Change
ixample: X Change X Remove		ohn Doe Mike Jones		
X Add		Sally Smith		
Type of Action Check One)	Title	Name	Address	
) Change	D	Keith Burt	407 Lincoln Road #12H	_
Add			Miami Beach FL 33139	
X Remove				_
?) Change	<u>D</u>	Kerry Burt	407 Lincoln Road #12H	-
Add			Miami Beach FL 33139	_
X Remove				
Change	<u>D</u>	Jon Sleeper	407 Lincoln Road #12H	_
XAdd		.	Miami Beach FL 33139	-
Remove				_
Change	<u>D</u>	Randall Hilliard	407 Lincoln Road #12H	
XAdd			Miami Beach FL 33139	_
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Page 2 of 4

Remove

(attach additional sheets, if necessary). (Be specific)		
A		
		
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	- I	

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	1
(no more than 90 days after amendment file date)	l l
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no locument's effective date on the Department of State's records.	t 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 amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	ļ
Dated October 16, 2017	
Signature Devid (Tolsa)	
(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)	
David Kelsey	
(Typed or printed name of person signing)	
President	
(Title of person signing)	