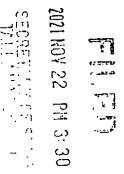
NOI 000000708

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			TATION, INC.
N0100000708 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Kimberly Mitchell			
	(Name of Contact I	Person)	
Country Club Condominium Association			
	(Firm/ Compar	ny)	
1835 Minutemen Cswy Unit 203			
	(Address)		• •
Cocoa Beach, FL 32931			
	(City/ State and Zip	Code)	<u> </u>
Kimken@att.net			
E-mail address: (to be use	d for future annual re	eport notificati	on)
For further information concerning this matter, please	e call:		
Kimberly Mitchell	ä	at .	842-5686
(Name of Contact Persor	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida	Department o	of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Cert ris Cert (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)
Mailing Address Amendment Section		treet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

Country Club Point Condominium Association, In	c		2021 NOV 22	PM 3: 30
(Name of Corporation as currently filed with the	e Flori <mark>da</mark> <u>D</u>	Dept. of State)		
N01000000708			SECRETARY TALL TILL	1951 1795 1851 - 18
(Docum	nent Numbe	er of Corporation (if known)	******	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this Florida Not For Profit	Corporation adopts th	ne following
A. If amending name, enter the new name of the	e corporati	ion:		
NA				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporat e.	ion" or "incorporated" or the	abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applica	ble:	NA		
(Principal office address <u>MUST BE A STREET A</u>			-	
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	NA		
				_
D. If amending the registered agent and/or reginew registered agent and/or the new register	stered office a	ce address in Florida, enter th	ne name of the	
Name of New Registered Agent:	Kimberly			
Name of New Registered Agent.	1835 Min	utemen Cswy Unit 203, Cocoa	Beach, FL 32931	<u>_</u>
		(Florida stree	r address)	
New Registered Office Address:				
			, Florida	
		(Ciṇ)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered nt. I am fai	Agent: miliar with and accept the oblig	gations of the position	t.
_	Saw	Guly Iwi gnature of New Registered Age	shell	
_	Si	gnature of Mw Registered Age	ent, 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:
(Ann. A. A. P. Connect of Communication)

(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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Michael J. Covello	
x Remove			
2) Change × Add	T	Robert Ridgeway	1835 Minutemen Cswy Unit 202 Cocoa Beach, FL 32931
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she	ng additional <u>Art</u> ets, if necessary).	ticles, enter change(s) here: (Be specific)	
NA			
<u></u>			
			

November 3, 2021
The date of each amendment(s) adoption: November 3, 2021 date this document was signed.
Effective date if applicable: November 3, 2021
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.

Dated	
Signatur	(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)
	Kimberly Mitchell
	(Typed or printed name of person signing)
	Vice President of the Board