NOI 000 000 708

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Be	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Q. SILAS
М	AR 11 2022
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SECRETARY OF STATE TALLAHASSEE, FL

February 11, 2022

KIMBERLY MITCHELL 1835 MINUTEMEN CSWY UNIT 203 COCOA BEACH, FL 32931

SUBJECT: COUNTRY CLUB POINT CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N01000000708

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas Regulatory Specialist II

Letter Number: 722A00003513

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	CLUB POINT CONDOMINIUM ASSOCIATION INC
N0100000708 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
KIMBERLY MITCHELL	
	(Name of Contact Person)
COUNTRY CLUB POINT CONDOMINIUM	LASSOCIATION
	(Firm Company)
1835 MINUTEMEN CSWY UNIT 203	
	(Address)
COCOA BEACH, FL 32931	
	(City/ State and Zip Code)
KIMKEN@ATT.NET	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
KIMBERLY MITCHELL	770 842-5686
(Name of Contact	
Enclosed is a check for the following amount i	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of S	
Mailing Address	Street 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 Articles of Incorporation

FILED

2022 FEB 28 PM 3: 44

COUNTRY CLUB POINT CONDOMINIUM ASSOCIATION INC

COUNTRY CLUB POINT CONDOMINIUM ASSOC	IATION INC	SECRETARY OF STATE
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	SEGRETARY OF STATE TALLAHASSEE, FL
N0100000708		
(Document)	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statines, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
NA		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name	rporation" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA	
(Principal office address <u>MUST BE A STREET ADD</u> E	RESS)	
		
C. Enter new mailing address, if applicable:	NA	
(Mailing address MAY BE A POST OFFICE BOX) <u> </u>	
		
 If amending the registered agent and/or registere new registered agent and/or the new registered of 		, enter the name of the
N'A		
Name of New Registered Agent:		
		
New Registered Office Address:	***	lorida street addresst
NA		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. 1		the obligations 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 X Remove X Add		Doe Lones (Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) <u>> Change</u> Add	PV	ROBERT SOBECK	1835 MINUTEMEN CSWY UNIT 201
Remove			COCOA BEACH, FL 32931
2) × Change Add	<u>VP</u>	KIMBERLY MITCHELL	1835 MINUTEMEN CSWY UNIT 203
Remove			COCOA BEACH, FL 32931
4) Change Add			
Remove			
5/ Change Add	<u>.</u>		
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she	ng additional A els, if necessary,	articles, enter change(s) here:). (Be specific)	
NA			
	-		

		·····
•		
		
		
		
		•
The date of each amendment(s) adoption date this document was signed.	JANUARY 1, 2022	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date will not hent of State's records.	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

Date	FEBRUARY 25, 2022 ed
Sigi	(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)

(Title of person signing)