NDZDDD001410

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-
: :		

Office Use Only



600270591656

03/16/15--01038--015 **35.00



Amund Sin,15

COVER LETTER

TO: Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327 Talk before G. 3224	$C \cap A \cap A$	0
NAME OF CORPORATION: 172ens	for Responsible Growth for Kivie	ina Beach
DOCUMENT NUMBER: NO 2000	00 74/0	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte		
William L. Conto	le.	
	(Name of Contact Person)	
	(Firm/ Company)	
Post Office Box	(Address) FL 33404 (City/ State and Zip Code)	
2	(Address)	
Kiviera Beach	FL 33404	
	(City/ State and Zip Code)	
William Contole E-mail address: (to be used	To bell South, net for future annual report notification)	
For further information concerning this matter, please		
William L Contole	at (561) 373-6619 (Area Code & Daytime Telephone Number	
(Name of Contact Person)	(Area Code & Daytime Telephone Number	r)
Enclosed is a check for the following amount made page	yable to the Florida Department of State:	,
\$35 Filing Fee \$\sum \text{\$\frac{1}{3}}\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

Citizens for Responsible Growth for Kiviera Beach	
(Name of Corporation as currently filed with the Florida Dept. of State)	
NO 200000 7410	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	ng
A. If amending name, enter the new name of the corporation:	
NIA The no	ew
name 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.	27
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	918181 3EC
	A SECOND
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:	2 POST
Name of New Registered Agent:	8 TO
(Florida street address) New Registered Office Address:	
, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

Page 1 of 4

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: XChange X Remove X Add	<u>V</u> <u>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	D	Stuart Cunningham	P. D. Box 119 Riviera Brach, FL 33404
2) Change	D	Robert Nevins	P.O. Box 119 RIVIERA BEACH, FL 33404
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
(10	
XIIA	
	···
•	
	,
	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) I.	
There are no members or members adopted by the board of director Dated Signature	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
(By the thair	than or vice chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Typed or printed name of person signing)	
	resident	
·	(Title of person signing)	