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PICK-UP WAIT MAIL	
(Business Entity Name)	
, , ,	
(Document Number)	
Certified Copies Certificates of Status	_
Consider Instructions to Cities Officer	٦
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Seascipe Condominium Association of Manatee, In
DOCUMENT NUMBER: NO3354
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lissete Hernandez (Name of Contact Person)
(Name of Contact Person)
Longboat Management Corp
(Firm/ Company)
510 Bay Isles Rd., Sk. 2 (Address)
Longboat Key, El 34228 (City/ State and Zip Code)
lissette h @ Onsboatment. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisselfc Hernandez at (941) 923-2323
(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 \$\begin{array}{c} \$\sumsymbol{\substack} \$\supsymbol{\substack} \$\supsymbol
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed) Street Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32314 Enclosed) Tallahasse

Tallahassee, FL 32301

Articles of Amendment

to

Articles	οf	Incorporation
Ai ucies	UI	tucoi boi atton

Seascipe Condominium ASSOCI	Thim of Marite	e, Irc.
(Name of Corporation as cur	rently filed with the Florid	la Dept. of State)
NO3354		
	mber of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated"	
B. Enter new principal office address, if applicable:		<u> </u>
(Principal office address <u>MUST BE A STREET ADDRE.</u>	(22	28 F
		7
		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If any ordinate ordinate of a second seco		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		mer the name of the
Name of New Registered Agent:		
Name of New Registered Agent.		
	(Flor	rida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		he obligations of the position.
	Signature of New Registe	red 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:

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.

Type of Action (Check One) Title Name Address Tressure Bill Frontera Add East-Wink Londows Key, FL 34776 2) Change President Micheale McKenne X Add Shijk 2 Londows Key, FL 34238 3) Change Add Londows Key, FL 34238 3) Change Add Remove 4) Change Add Remove 5) Change Add Remove 6) Change Add Remove 6) Change Add Remove	Example: X Change X Remove X Add	PT John I V Mike I SV Sally S	Jones .	
		<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Add	Add	Treasurer	Bill Frontera	510 Bny Isles Road Easl-Wing Longboat Ken, FL 34220
3) Change	_X_ Add	President	Micheale McKenne	
AddRemove 5) ChangeAddRemove 6) Change	3) Change			
Add	Add			
Add	Add			
	Add			

(attach additional sheets, if necessary). (Be specific)	
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The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date if applicable:		
(no n	nore than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	meet the applicable statutory filing requirements, this date was State's records.	ill not be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the amendment(s	s)
☐ There are no members or members entitled adopted by the board of directors.	I to vote on the amendment(s). The amendment(s) was/were	
Dated	2018	
Signature	Well M	
have not been selected.	chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or iduciary by that fiduciary)	
	ssette Hernandez	
	(Typed or printed name of person signing)	
A:	SSOCIOTION Militaicer-	
 	(Title of person signing)/	