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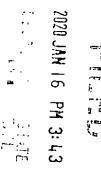
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Lescent Beach Professional Office N0400000 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jill Mangum
(Name of Contact Person) Ciescent Beach Professional Office 6275 A1A S. Suite 102
(Address) Mangum I & Jahoo. Com
E-mail address) (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: 5 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment**

to
Articles of Incorporation
of

Crescent Beach Profession	ral Offi	ce Owners	ASSOCIATION,
(Name of Corporation as currently filed with the Florida			INC.
N040000	77797		
(Document Numb	per of Corporation (	if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	t For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpora	tion:		
		. The .7 T.	The new
name must be distinguishable and contain the word "corpora" (Company" or "Co." may not be used in the name.	tion" or "incorpor	ated" or the abbreviatio	n "Corp." or "Inc."
			70
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	)		
Trincipal office described in the second sec	, 		
			70
			<u></u> 3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Maining and CSS (MATT BE 111 OB 2 O 2 1 1 0 2 D 2 1 1)			Ţ. i
	<del></del>		
			<del></del>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office :		ida, enter the name of	the
Name of New Registered Agent:			
<del></del>		(Florida street address)	
New Registered Office Address:		(FROTIAL STREET MATERIA)	
		, Flor	
	(City)	(Zi	ip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and acc	cept the obligations of th	e position.
<u></u>	ignature of New Re	gistered Agent, if chang	ing

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	PT John Do V Mike Jo SV Sally St	ones en	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	T,D	Steven E. Milo	151 Sawgrass Corners Dr Ste 200 Ponte Vedra Boh \$2082
Remove  2) Change Add	1 <u>P,T,</u> D	Suzanne M Tumlin	
Remove 3) Remove	<del></del>		
4) Change Add			
Remove			
5) Change Add			
Remove			<u></u>
6) Change Add	<del></del>		
	dding additional Arti sheets, if necessary).	Page 2 of 4 icles, enter change(s) here: (Be specific)	
	<u></u>		

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Page 3 of 4	
The date of each amendment(s) adoption: January 1, 2020	
date this document was signed.	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	ill not 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.	
Dated $\frac{1/8/20}{2}$	
Signature 1 2 1	
(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)	
Benjamin Lacy (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
VSD	
(Title of person signing)	