N04000009753

(Re	questor's Name)		
(Ad	dress)		
(A d	dress)		
(City/State/Zip/Phone #)			
PICK-UP	· 	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		
·			

Office Use Only

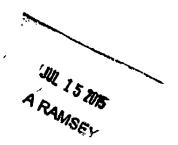


100274849131

07/10/15--01012--004 **35.00

anena





COVER LETTER

TO: Amendment Section

, Division of Corporations

NAME OF CORPORATION: CORAL KEY HOME OWNERS ASSOCIATION, IN
DOCUMENT NUMBER: NO 4 00000 9752.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES Kealey. (Name of Contact Person)
COMMUNITY ASSOCIATIONS MANASEMENT, INC. (Firm/Company)
2060 HWY AIA SUITE 303 (Address)
INDIAN HARBOUN BEACH FL 32937. (City/ State and Zip Code)
E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
TAMES Region at 321 777 0402. (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 Status Certified Copy Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

			of	FILE	IJ
CORAL	KEY	Homeou	uners As	SOCIA MADUL, 10/1	PHC2: 5!
	(Name of Cor	poration as currently	filed with the Florida	Dept. of State)	op state
N	240000	29752		Dept. of State)	. FLORIC
		(Document Number	of Corporation (if know		
	ions of section 617.1		this <i>Florida Not For P</i>	rofit Corporation adopts the fo	ollowing
. If amending name	e, enter the new nar	ne of the corporation	<u>ı:</u>		
					The new
Company" or "Co."	may not be used in	the name.	n" or "incorporated" o	or the abbreviation "Corp." of	- "Inc."
	pal office address, it ess <u>MUST BE A ST</u>				·
9,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , ,			
				•	
		-			
	ng address, if applic		•		
(Maning anaress	MAY BE A POST O	<u>PFFICE BOX</u>)			
		_			· · · · · · · · · · · · · · · · · · ·
		•			
		d/or registered office registered office ad-	address in Florida, en	ter the name of the	
new registered at	ent ana/or the new	registered office au	uress:		
<u>Nan</u>	ne of New Registered	d Agent:			-
Ma	w Registered Office	Addrass:	(Florid	da street address)	
110	w Registered Office	<u>Aauress</u> .			
				, Florida	
			(City)	(Zip Code)	
ew Registered Age hereby accept the ap	nt's Signature, if ch opointment as registe	nanging Registered A ered agent. I am fam	gent: iliar with and accept the	e obligations of the position.	
		Sig	nature of New Registere	ed 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: XChange X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	LAUNIE WIllis	2060 HWY AIA SUITE 303 INDIAN HARBOUT BEACH FL 32937
2) Change Add	<u> </u>	SHAWNSEMAN	2060 HWY ALA SUITE 303 INDIAN HARBOUN BOOCL
Remove 3) Change Add Remove	ρ	KAREN REARDON	FL 32937. 2060 HWY AIA SUITE 303 INDIAN HARBOUN BEACH FL 32937.
4) Change Add Remove	MgR	JAMES Kealoy	ZOGO HUN AIA SUIE 303 INDIAN HARBOUN BEACH. FL 32937.
5)	√P	William OSBORNE	INDIAN HARBOURBEACH. FL. 32937
6) Change Add Remove			

E. If amending or adding additional Articles	enter change(s) here:		
E. If amending or adding additional Articles (attach additional sheets, if necessary). (But a sheet sh	e specific)		
·			
	i -	<u> </u>	
		<u></u>	
)		
		- · · · ·	
			·
	:		

The	date of each amendment(s) adopt	ion:	, if other than the
	this document was signed.		
Effe	ctive date <u>if applicable</u> :		
		(no more than 90 days after amendment file da	ne)
	e: If the date inserted in this block on the Depart	loes not meet the applicable statutory filing requirment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
	The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast f	or the amendment(s)
Ą	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amend	iment(s) was/were
	Dated7_1	115.	
	Signature		
	have not been	or vice chairman of the board president or other elected by an incorporator – if in the hands of a rointed fiduciary by that fiduciary)	
	Jan	(Typed or printed name of person sign	ning)
		(Title of person signing)	
		(Title of person signing)	