N04089

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	#) .		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



400263642614

10/02/14--01039--010 **43.75

14 SEP 19 PN 3: 23

COVER LETTER

TO: Amendment Section Division of Corporations

, D

•		•			
Cedar Key	Oystermen	's Association,	INC.	_	
104089					
dment and fee are sub	nitted for filing			-	
	· ·				
e concerning this matte	r to the following:				
S					
	(Name of Contact Perso	on)		•	
	(Firm/ Company)				
th PL	(Time Company)				
	(Address)			•	
32625					
	(City/ State and Zip Cod	le)			
·	•	notification)			
6	_{at} 352	507-1628			
ct Person)	(Area C	ode & Daytime Telephone N	Number)	•	
owing amount made pay	yable to the Florida Dep	artment of State:		14 SE	
1\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		P 19 PH 3: 2	
Mailing Address Amendment Section Street Address Amendment Section		<u>;</u> ; =:	ري		
orporations	Divisi	on of Corporations			
	J04089 dment and fee are subre concerning this matter. S th PL 32625 9519@bellarladdress: (to be used ing this matter, please of the plea	dment and fee are submitted for filing. e concerning this matter to the following: (Name of Contact Person) (Firm/ Company) th PL (Address) 32625 (City/ State and Zip Cooperations and the Florida Deputation of Status Certified Copy (Additional copy is enclosed) (Reserved to the Florida Deputation of Status Certified Copy (Additional copy is enclosed) (Reserved to the Florida Deputation of Status Certified Copy (Additional copy is enclosed) (Reserved to the Florida Deputation of Status Certified Copy (Additional copy is enclosed)	dment and fee are submitted for filing. e concerning this matter to the following: S (Name of Contact Person) (Firm/ Company) th PL (Address) 32625 (City/ State and Zip Code) 9519@bellsouth.net all address: (to be used for future annual report notification) ing this matter, please call: (Area Code & Daytime Telephone for the contact of States) (Area Code & Daytime Telephone for States) (Additional copy is enclosed) (Additional Copy (Additional Copy is enclosed) (Additional Copy is Enclosed)	dment and fee are submitted for filing. e concerning this matter to the following: S (Name of Contact Person) (Firm/ Company) th PL (Address) 32625 (City/ State and Zip Code) 9519@bellsouth.net all address: (to be used for future annual report notification) ing this matter, please call: S at (352 507-1628 ct Person) (Area Code & Daytime Telephone Number) owing amount made payable to the Florida Department of State: 1343.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certificate Opy (Additional Copy is enclosed) (Additional Copy is Enclosed) Fees Section Origonations 7 Street Address Amendment Section Division of Corporations Clifton Building	dment and fee are submitted for filing. e concerning this matter to the following: (Name of Contact Person) (Firm/ Company) (th PL (Address) 32625 (City/ State and Zip Code) 9519@bellsouth.net all address: (to be used for future annual report notification) sing this matter, please call: (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number) (Additional copy is Certificate of Status

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

1 58 o Ph 3: 23

Cedar Key Oystermen's Association, INC

(Name of Corporation as currently filed with the Florida Dept. of State) N04089

(Document Number of Corporation (if known)

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 ne
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable:	13351 SW 67th PL
(Principal office address <u>MUST BE A STREET ADDRES</u>	Cedar Key, FL 32625
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O Box 73
	Cedar Key,FL 32625
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	e address:
Name of New Registered Agent: Robert G	· · · · · · · · · · · · · · · · · · ·
13351 SV	V 67th PL
New Registered Office Address:	(Florida street address)
Cedar Ke	ey, Florida 32625
(Ci	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am Signature of New York Properties New Registered Agent's Signature, if changing Register New Registered Agent's Signature, if changing Registered Agent. I am I a	ed Agent: familiar with and accept the obligations of the position. ew 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: X Change X Remove X Add	V Mi	<u>nn Doe</u> ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Ricky Cooke	1133 Whiddon Ave
Add Remove			Cedar Key, FL 32625
2) Change	VP	Troy M Beckham	8531 SW C.R 347
Add X			Cedar Key, FL 32625
Remove 3) Change	TR/SD	Angie E Beckham	8531 SW C.R 347
Add X Remove			Cedar Key, FL 32625
4) Change	Р	Robert G Sims	13351 SW 67th PL
X Add Remove			Cedar Key, FL 32625
5) Change	VP	William Wheeler	8165 SW County Road
X Add Remove			8165 SW County Road 347 Cedar Ley 1FZ 32625
6) Change	ST	Jeanine Beckham	Jeanne Bekann
X Add			8991 NW 30+15 ST
Remove		Page 2 of 4	Chiefland, F1. 82621

attach additional sheets, if necessary).	(Be specific)				
		 · · · ·	<u> </u>		
		 -			
·		_		_	
			_	_	
			_		
					_
·					

The date of each amendment(s) adoption: 8/29/1.4 date this document was signed.				
	Effective date if applicable: 8/29/14			
	-	(no more than 90 days after amendment file date)		
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.		
	There are no members or adopted by the board of c	members entitled to vote on the amendment(s). The amendment(s) was/were directors.		
	Dated	01 1 49.		
	Signature	Let U. Amo		
		chairman or vice chairman of the board, president or other officer-if directors		
		not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)		
•	_ {	obert G. Sims		
		(Typed or printed name of person signing)		
		President		
	<u> </u>	(Title of person signing)		