N05000001903

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EXAMINER

ROBERT S. THURLOW, P.A.

*ATTORNEY AT LAW CERTIFIED FAMILY MEDIATOR
415 CANAL STREET
NEW SMYRNA BEACH, FLORIDA 32168

ASSISTANTS:
JANE MYERS: FAMILY & CIVIL
DIANE EYRE: ESTATES & PROPERTY
MARJORIE THURLOW: CLIENT SERVICES
GLENDA SNELL: ACCOUNTING

November 4, 2009

PHONE:
(386) 424-1530
FAX:
(386) 424-1493
E-MAIL:
rthurlow@bellsouth.net

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

RE: SANIBEL CONDOMINIUMS ASSOCIATION, INC.

Doc. No. N05000001903

Dear Sir/Madam:

Enclosed are:

- 1. Cover Letter & Articles of Amendment to Articles of Incorporation and 1 copy
- 2. Check in the amount of \$35.00
- 3. Stamped pre-addressed envelope

I look forward to receiving your letter of acknowledgment of filing the amendment. Should you have any questions during your process procedure, please do not hesitate to call my secretary Jane.

Thank you for your assistance.

Very truly yours,

Robert S. Thurlow

RST: jkm

Enclosure(s)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Sanibel Co	ndominiums	Associatio	on, Inc.
DOCUMENT NUMBER:	N050000019	03		
The enclosed Articles of Amendm	ent and fee are sub	mitted for filing.		
Please return all correspondence of	oncerning this matt	er to the followin	g:	
	Dahasak di 1	nh1		
	Robert S. '	<u> </u>	sq.	
,	(Name of	Contact Person)		
	Robert S. '	Thurlow, P	.A.	
	(Firm	/ Company)		
	415 Canal	Street		
 	(4)	Address)		
	New Smyrna	Beach, FL	32168	
6	(City/ Stat	e and Zip Code)		
	kgoodman@	goodmanbre	en.com	
E-mail	address: (to be use			on)
For further information concerning	g this matter, please	e call:		
Robert S. Thurlow, E	sq.	at (386	424-1530	<u> </u>
(Name of Contact I	Person)	(Area	Code & Daytime	Telephone Number)
Enclosed is a check for the follow	ing amount made p	ayable to the Flor	rida Department of	f State:
	Filing Fee & e of Status	□ \$43.75 Fil Certified Cop (Additional c enclosed)	by	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis Clifto	t Address adment Section ion of Corporations an Building Executive Center C	·

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

SANIBEL CONDOMI	NIUMS ASSOCIATION,	INC.
(Name of Corporation as currently file	d with the Florida Dept. of S	tate)
N0500	0001903	
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Sthe following amendment(s) to its Articles of Incorporation		Profit Corporation adopts
A. If amending name, enter the new name of the corr	poration:	
	NA	
The new name must be distinguishable and contain th abbreviation "Corp." or "Inc." "Company" or "Co." I		scorporated" or the
B. Enter new principal office address, if applicable:	NA	3 2.
(Principal office address <u>MUST BE A STREET ADDR</u>	PESS)	20 NG
		V 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) NA	PH PH
		90 P
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:		nter the name of the
Traine of their Register earingem.	NA	
New Registered Office Address:	(Florida street address)	 ,
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. position.	tered Agent: I am familiar with and acc	cept the obligations of the
Signature	of New Registered Agent, if c	hanging

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)

Name <u>Address</u> Type of Action Title DΡ Herring, Glen 424 Fox Run ☐ Add DeBary, FL 33071 Remove **DSTVP** Stevens, Sherry 1050 Borghese Ln. Add ☐ Remove <u>#506</u> Naples, FL 34114 Goodman, Mark A. ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) NA

The date of each amendment(s	s) adoption: 10/29/2009
Effective date <u>if applicable</u> :	(date of adoption is required) 10/29/2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro-	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or madopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated	10/29/2009
Signature _	Constanced?
have	the 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)
	Sherry Stevens
	(Typed or printed name of person signing)
•	Vice President
	(Title of person signing)

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