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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI		AGE CONDOMINIU	M RESORT	ASSOCIATION, I	NC.		-
DOCUMENT NUMBER:	N06000008229						_
The enclosed Articles of Ar		mitted for filing.					
Please return all correspond	ence concerning this matte	er to the following:					
DEBBIE TAGG-PORTO							
-		(Name of Contact Pe	rson)				-
SEBASTIAN RIVERFROI	NT CONDOMINIUM AS	SOCIATION					
		(Firm/ Company	)			-	-
1623 INDIAN RIVER DRI	VE UNIT 201						
<del></del>		(Address)					-
SEBASTIAN, FLORIDA	32958						
		(City/ State and Zip C	Code)	-			-
SCOTT@HSKPROPERTY	MANAGEMENT.COM				ري.	20	
	E-mail address: (to be used	for future annual rep	ort notification	on)	- 11 - 2 m) - 1 m)	- <u></u>	
For further information con	cerning this matter, please	ecall:			:!	EB 2	i I
SCOTT KNAUER		at	772	584-0437	***************************************	9 9	r
	(Name of Contact Person	)	(Area Code)	(Daytime Telep	hone Numb	ег)	
Enclosed is a check for the	following amount made pa					<u>မ</u>	
□ \$35 Filing Fee	≡\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Centi S Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)			

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SEBASTIAN VILLAGE CONDOMINIUM RESORT ASSOCIATION, INC.

Name of Corporation as currently filed with the Flor N06000008229		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Sumendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corp	poration:	
SEBASTIAN RIVERFRONT CONDOMINIUM ASSO	CIATION, INC.	The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "(	Corp." or "Inc."
B. Enter new principal office address, if applicable:	1623 INDIAN RIVER DRIVE UNIT 201	
Principal office address MUST BE A STREET ADDR.	(ESS) SEBASTIAN, FLORIDA 32958	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1623 INIDIAN RIVER DRIVE UNIT 201	
	SEBASTIAN, FLORIDA 32958	
		- <u>- 2</u> -
D. If amending the registered agent and/or registered		7.6% 7.6%
new registered agent and/or the new registered of	fice address:	- B .
Name of New Registered Agent:		22
New Registered Office Address:	(Florida street address)	PM 4: 31
<del></del>	(City), Florida	ode)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a	tered Agent: am familiar with and accept the obligations of the pe	osition.
	Signature of New Registered 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change Add		_		
Remove				
2) Change Add		_		
Remove 3) Change Add Remove		-		
4) Change Add		_		
Remove  5) Change Add		_		
Remove 6) Change		_		
Add				
E. If amending or addir (attach additional shee			icles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption:	OCTOBER 21, 2023	, if other than the
The date of each amendment(s) adoption:		ii outer than the
date ims document was signed.		
Effective date if applicable: OCTOBER 21	1, 2023	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does n	not meet the applicable statutory filing requirements, this date will no	t be listed as the
document's effective date on the Department	of State's records.	
	CHECK ONE)	
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.

Adoption of Amendment(s)

Dated	FEBRUARY 24, 2024
Signat	ure Still Imwn
1/1 <b>g/im</b> 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)
	SCOTT KNAUER
	(Typed or printed name of person signing)

(Title of person signing)