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TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: AQUA AT PEL	ICAN ISLE MAF	RINA, INC.		
DOCUMENT NU	MBER: N06000008652				
The enclosed Artic	les of Amendment and fee are sub	mitted for filing.			
Please return all co	rrespondence concerning this matte	er to the following:			
		Grabinski, Esq.			
	(Name of	Contact Person)			
Coleman Yovanovich Koester					
	(Firm/	Company)			
····	4001 Tamiami Trial North, Suite 300				
	(A	ddress)			
. <u>515</u>	· · · · · · · · · · · · · · · · · · ·	, FL 34103	<u></u>		
	(City/ State	e and Zip Code)			
	. *	er@comcast.net			
	E-mail address: (to be used		rt notification)		
For further information	tion concerning this matter, please	call:			
Matthew L. Grat	oiniski	at (239) 4	135-3535		
(Nam	ne of Contact Person)	(Area Code	435-3535 & Daytime Telephone Number)		
Enclosed is a check	for the following amount made pa	yable to the Florida De	epartment of State:		
 	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fe Certified Copy (Additional copy is enclosed)	Certificate of Status		
	iling Address	Street Addr	ress		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

AQUA AT PELICAN ISLE MARINA, INC.

(Name of Corporation as currently filed with the Florida Dept. of Sta

N06000008652

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

the following amendment(s) to its Articles of Inc	corporation:	
A. If amending name, enter the new name of	the corporation:	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." <u>"Company" or</u>		
B. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or re new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
-	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing	g Registered Agent:	

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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) **Type of Action Title** Name Address DVP Kyle E. Meyer 1401 East Broward Boulevard ☐ Add ☑ Remove Suite 103 Fort Lauderdale, FL 33301 Christopher J. Hanlon DVP 1400 Gulf Shore Boulevard N ☑ Add ☐ Remove Suite 142 Naples, FL 34102 ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: September 9, 2011				
Effective date if applicable:	September 9, 2011			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.			
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.			
Dated Sep	tember 9, 2011			
hav	the chairman or view hairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)			
	Thomas W. Jeffrey			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			