

| (Re | questor's Name) | | |
|-------------------------|------------------|-------------|--|
| (Ad | dress) | | |
| (Ād | dress) | | |
| (Cit | y/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Na | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificate: | s of Status | |
| Special Instructions to | Filing Officer: | | |
| | | | |
| | | | |
| | | | |

Office Use Only



200319802102

10/22/18--01017--024 **65.00

Phr

FILED
2018 OCT 22 PM 2: 5
SEGGENARY GESTATI

R. WHITE 007 2 9 2018

COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

| SPINNAKER BAY NAME OF CORPORATION: | MANASOTA CONDON | MINIUM ASSOCIATION INC |
|--|--------------------------|--|
| N07000006416 | | |
| DOCUMENT NUMBER: | | |
| The enclosed Articles of Amendment and fee are subr | nitted for filing. | |
| Please return all correspondence concerning this matte | er to the following: | |
| ALEX MONTERO | | |
| | (Name of Contact Perso | n) |
| | | |
| | (Firm/ Company) | |
| 7805 CORAL WAY #102 | | |
| | (Address) | |
| MIAMI, FL 33155 | | |
| | (City/ State and Zip Cod | e) |
| ALEXMONTEROCPA@GMAIL.COM | | |
| E-mail address; (to be used | for future annual report | notification) |
| For further information concerning this matter, please | call: | |
| ALEX MONTERO | atat | 5-265-2293 |
| (Name of Contact Person |) (A | rea Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | yable to the Florida Dep | artment of State: |
| ■ \$35 Filing Fee | | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Ameno Divisio | Address Iment Section on of Corporations Building |

2661 Executive Center Circle Tallahassee, FL 32301

. از مجلکات دریا

Articles of Amendment Articles of Incorporation of

FILED

2018 OCT 22 PM 2:51

| (Name of Corporation as of N07000006416 | urrently filed with the Flor | ida DepiSenstaten 1RY OF STATE TALLAHASSEE, FL |
|---|--|---|
| | Number of Corporation (if k | nown) |
| (Document | runner or corporation (if ki | iovii) |
| Pursuant to the provisions of section 617.1006. Florida amendment(s) to its Articles of Incorporation: | Statutes, this <i>Florida Not Fo</i> . | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of the cor | poration: | |
| | | The new |
| name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name. | rporation or "incorporated | t or the abbreviation "Corp. or "Inc. |
| B. Enter new principal office address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDI | RESS) | · · · · - |
| | | |
| | | _ |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> | · | |
| | | |
| | | |
| D. If amending the registered agent and/or registere | d office address in Florida | enter the name of the |
| new registered agent and/or the new registered o | | CHICL CRY WARRY OF CHIC |
| Name of New Registered Agent: | | |
| | | |
| | (Flo | orida street address) |
| <u>New Registered Office Address:</u> | | |
| | (City) | , Florida (Zip Code) |
| | (c 1/y) | (7.14) C (ARC) |
| New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I | | the obligations of the position |
| тиску, шесері та арұлаттан из гезимства адет. Т | am jamua win ana accept | na conganors of the position. |
| | | |
| - | Signature of New Regist | ered 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>V</u> <u>Mik</u> | n Doe e Jones y Smith | |
|-----------------------------------|---------------------|-----------------------------|-----------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP,DIRI | KATHY M. SCHULTZ | 16941 YELLOWSTONE DR |
| Add | | | EAGLE RIVER, AK 99577 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| attach additional sheets, if necessar | v). (Be specific) | | | | |
|---------------------------------------|-------------------|-------------|---|----------|-------------|
| | | | | | |
| | | | | <u> </u> | |
| | | | | | |
| | | | | | |
| | | | | | |
| | ~ ~~~~ | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | - | _ | |
| | | · | | | |
| | | | | | |
| | | | | | |
| | · · | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| The date of each amendment(s) adoption: | | , if other than the |
|---|--|-------------------------------------|
| late | te this document was signed. | |
| Effe | fective date <u>if applicable</u> : | |
| | (no more than 90 days after amendment file date) | |
| | ote: If the date inserted in this block does not meet the applicable statutory filing requirements, to cument's effective date on the Department of State's records. | this date will not be listed as the |
| Ado | doption of Amendment(s) (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were adopted by the members and the number of votes cast for the an was/were sufficient for approval. | nendment(s) |
| | There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors. | was/were |
| | Dated | |
| | Signature (MM) | |
| | (By the chairman or vice chairman of the board, president or other officer-inhave not been selected, by an incorporator — if in the hands of a receiver, to other court appointed fiduciary by that fiduciary) | |
| | ALEX MONTERO | |
| | (Typed or printed name of person signing) | |
| | SECRETARY/TREASURER/DIRECTOR | |
| | (Title of person signing) | |