(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

Waterside Jucht N0000007337 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) lucht Chb, Inc. 5000 Coquina Key Dr SE Petersburg, FL. 33705 Payson @ ADSSecurity. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Paul R. Dyson or John Fossom at 727 - 466 - 3871

(Name of Contact Person) (Area Code) (Daytime Telephone N Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of	
Waterside Wight (Wb. Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
NOB00000 2337	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following intendment(s) to its Articles of Incorporation:	ving
A. If amending name, enter the new name of the corporation:	
The r	16W
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "In "Company" or "Co." may not be used in the name.	c. "
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	_
2. Enter new mailing address, if applicable:	,
(Mailing address MAY BE A POST OFFICE BOX)	
	.
	<u>-</u>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	-
new registered agent and/or the new registered office address:	-
Name of New Registered Agent:	
(Florida street address)	
New Registered Office Address:	
, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: thereby 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)

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u> </u>	John Tossum	1720 Coquina Kuy Dr SE. Van C Saint Petersburg FL 33705
Remove			
2) Change	<u>V?</u>	Anita Dyson	Saint Peters 1, FL 33705
Remove 3)	TISEC	Steve Stratton	5130 Ceguna Kuy Dr SE Saint leters burg, FL 33705
Remove			
4) Change			
Remove			
5) Change	<u> </u>		
Add			
6) Change			
Remove			

(attach additional sheets, if necessary).	(Be specific)
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PA-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
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The date of each amendment(s) adoption date this document was signed.	on: November 27, 2017, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted was/were sufficient for approval.	1 by the members and the number of votes cast for the amendment(s)
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were
Dated Nov	lags-
Signature X	1295-
(By the chairman of have not been selections)	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Director
	(Title of person signing)