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(Requestor's Name)				
(Address)				
(Add	lress)	<u> </u>		
(City	/State/Zip/Phon	e #)		
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(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations						
Snook Bight Marina Dry Rack Condominium Association, Inc SUBJECT: Name of Corporation						
•						
DOCUMENT NUMBER: NO800007661						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Joseph Yerkes						
Name of Contact Person						
Snook Bight Marina Dry Rack Condominium Association, Inc.						
Firm/Company						
15880 Summerlin Rd. 300 PMB397						
Address						
Ft. Myers, FL 33908						
City/State and Zip Code						
joe@joeyerkes.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Joe Yerkes Name of Contact Person at (239-560-9338						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section Amendment Section						

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

FILED

16 JAN -8 AM 6: 30

SECRETARY OF STATE

Snook Bight Marina Dry Rack Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State N08000007661 (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 Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 15880 Summerlin Rd. 300 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) PMB 397 Ft Myers, FL 33908 C. Enter new mailing address, if applicable: 15880 Summerlin Rd 300 (Mailing address MAY BE A POST OFFICE BOX) PMB 397 Ft Myers, FL 33908 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: Joseph Yerkes Name of New Registered Agent: 15880 Summerlin Road 300 PMB397 (Florida street address) New Registered Office Address: Ft Myers Florida (City) (Zip Code) New Registered Agent's Signature, if changing 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),

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>Mi</u>	hn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	ST Fund CP, LLC	17330 Preston Rd.
Add			Dallas, TX 75252
x Remove			
2) Change	P	Joseph Yerkes	15880 Summerlin Rd 300
Add			PMB 397
Remove			Ft Myers, Fl 33908
3) Change	VP	Mike Coyle	29 Arctic Springs
x Add			Jeffersonville, IN 47130
Remove			
4) Change	S/T	Jennifer Schmidt	11330 Compass Point
x Add			Ft Myers, FL 33908
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) her (attach additional sheets, if necessary). (Be specific)	
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The date of each amendment(s) adoption:late this document was signed.		, if other than the	
	ective date <u>if appli</u>		
		(no more than 90 days after amendmen	t file date)
		ed in this block does not meet the applicable statutory filing te on the Department of State's records.	g requirements, this date will not be listed as the
Ado	ption of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient	was/were adopted by the members and the number of vote t for approval.	es cast for the amendment(s)
	There are no mem adopted by the bo	pers or members entitled to vote on the amendment(s). The ard of directors.	e amendment(s) was/were
	Dated	November 12, 2015	
	Signature	Mull	
	3	By the chairman or vice chairman of the board, president of have not been selected, by an incorporator – if in the hand other court appointed fiduciary by that fiduciary)	
		Joseph Yerkes	
		(Typed or printed name of pers	son signing)
		President	
		(Title of person sig	ning)