N080000N064

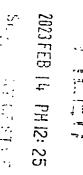
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S CHATHAM



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SEBASTIAN RIVI	ER CENTER CONDOMIN	IIUM ASSOCIATION INC	
DOCUMENT NUMB	BER: N08000011064			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	JENNIFER L LOAR OD			
		Name of Contact Person	1	
	OCEANVIEWS OPTICAL II	NC		
	Firm/ Company			
	7785 144TH STREET, A2A			
		Address		
	SEBASTIAN, FL 32958			
		City/ State and Zip Code	2	
	DRLOAR@OCEANVIEWS	OPTICAL.COM		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
JENNIFER L LOAR	OD	at (⁷⁷²	532-5371	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

SEBASTIAN RIVER CENTER CONDOMINIUM ASSOCIATION INC

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(<u>Ivaine c</u>	or Corporation as currenti	<u>y filed with the Florida Dept. of</u>	State)
N08000011064			
	(Document Number o	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopt	ts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "Chartered," "professional association."	Corp," "Inc," or "Co". A	ompany," or "incorporated" or t professional corporation name	the abbreviation "Corp.," must contain the word
B. Enter new principal office address, (Principal office address MUST BE A S			
			2023 F
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			B 1
	-		1
			N N
D. If amending the registered agent an			of the က် ဟိ
new registered agent and/or the nev	<u>w registered office address</u> KRISTINE FLEMING		
Name of New Registered Agent	7765 144TH STREET, UN	IT 6	
	(Florida str		
New Registered Office Address:	SEBASTIAN	E1.	32958 orida
New Registered Office Address.		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position.
Ka	of Q	. 0	•
<u> </u>	Signature of New Re	egistered 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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	ST	KRISTINE FLEMING	7765 144TH STREET
X Add			UNIT 6
Remove			SEBASTIAN, FL 32958
2) Change	V	SEAN FLEMING	7765 144TH STREET
X Add		-	UNIT 6
Remove 3) Change			SEBASTIAN, FĽ 32968
Add			25
Remove			
4) Change			
Add			
Remove			a. .
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
ADDING KRISTINE FLEMING TO THE BOARD AS TREASURER AND SECRETARY	
AND	
ADDING SEAN FLEMING TO THE BOARD AS VICE PRESIDENT	
KEEPING JENNIFER L LOAR OD AS THE BOARD PRESIDENT	
	2023 F LB
	7
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	PH 12: 25

The date of each amendment(s) ac	02/10/2023	:	if other than t
ate this document was signed.	option:	,	H OMET HIAH L
02/10	0/2023		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		<u></u>
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not	be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	older action and sha	reholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amo	endment(s)	
must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	t(s):	
	for the amendment(s) was/were sufficient for approval	2023 FEB 4 SECKED A	
by	ISTINE FLEMING AND SEAN FLEMING		·T]
	(voting group)		(, 7-222) (, 7-222) (
02/10/2023 Dated		PH 12:	31
Signature		25	
selected	rector, president or other officer – if directors or officers have r l, by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)		
	JENNIFER L LOAR OD		
	(Typed or printed name of person signing)		
	PRESIDENT		

(Title of person signing)