N10300

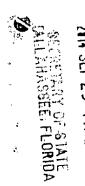
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations

Jackt Club Condominium association North, Inc. 0300 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Polm How ber Blod.

(Address) E-mail address: (to be used for future annual feport notification) For further information concerning this matter, please call: at (SM) 9/8/1366 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2014

Tri Morocco The Melrose Management Partnership 3527 Palm Harbor Blvd. Palm Harbor, FL 34683

SUBJECT: ROYAL YACHT CLUB CONDOMINIUM ASSOCIATION NORTH,

INC.

Ref. Number: N10300

We have received your document for ROYAL YACHT CLUB CONDOMINIUM ASSOCIATION NORTH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Page 4 of the amendment form was left blank.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (1) (850) 245-6050.

Annette Ramsey Règu<u>la</u>tory Specialist II

Letter Number: 514A00018645

21-15 /

州村

Articles of Amendment	· •			
to Articles of Incorporation	FILED.			
Of of	ausociatishin Storth, Ita			
(Name of Corporation as currently filed with the Florida Dept. of State)	SECRETARY OF FLORIC			
N10300	TALLAHASOLE			
(Document Number of Corporation (if known)	And the second second			
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit amendment(s) to its Articles of Incorporation:	t Corporation adopts the following			
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporation" or "incorporated" or the	The new			
"Company" or "Co." may not be used in the name.	Λ 1			
B. Enter new principal office address, if applicable: 3527	Ralm Harber Blod			
(Principal office address MUST BE A STREET ADDRESS) Palm Ha	· chac			
	1 100			
	34683			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SOLVE	ne 1			
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	he name of the			
T. 6 0 11	0.05.20			
C C C C	anson			
3507 Kalm Hewbor (Florida street address)	5/vo.) - falm			
New Registered Office Address:				
Palm Harber F	lorida 3 46 83			
(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 oblig	gations of the position.			
Signature of New Registered Agent, if changing				
Page of 4				

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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PD	Michael Sinski	
Add			
<u></u> Remove			
2) Change	VD	Dave Dawson	Palm Harbur Blad
Remove 3) O Change	PD	Neil Post	F1 34683
Add			Same as abone
Remove	TD	Tom Paul	Same as alan
Add Remove		•	June as asom
5) Change	<u>D</u>	Jack Winebrenner	Same as abone
Remove			
6) <u>X</u> Change Add	SD	Robin Trotter	Same as alane
Remove		Oddus orly Page 2 of 4	

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)		
			
			
			
	_ 		
			
			
<u>,</u>			
			····

The date of each amendment(s) adoption:		, if other than the
Effective date <u>if applicable</u> :	·	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	
There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated Signature	S/25/14 Day	
(By the chairn have not been	nan or vice chairman of the board, president or other officer-if directors a selected, by an incorporator — if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
0	AUID M. DAWSON	
	Typed or printed name of person signing)	
	(Title of person signing)	