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(Ci	ty/State/Zip/Phone	· #)
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09/08/14--01012--010 **35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Coconut Pa	alms Homed	owne	ers Association, Inc
DOCUMENT NUMBER:	<u> </u>	N1100001	014	15
The enclosed Articles of Amend	<i>lment</i> and fee are subr	nitted for filing.		
Please return all correspondence	e concerning this matte	er to the following:		
Tony DeCamil	lis			
		(Name of Contact Po	erson)	
Coconut Palm	s Homeow	ners Ass	ocia	ation, Inc.
 		(Firm/ Company	y)	
1982 State Rd	44, #200			
		(Address)		
New Smyrna E	Beach, FL	32168		
		(City/ State and Zip	Code)	
	tpalmshoa	_		
E-ma	il address: (to be used	for future annual rep	port not	ification)
For further information concern	ing this matter, please	call:		
Tony DeCamil	lis	_{at (} 407	7	492-3456
(Name of Contac	ct Person)			& Daytime Telephone Number)
Enclosed is a check for the follo	wing amount made pa	yable to the Florida I	Departn	nent of State:
■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	iection orporations 7	An Di Cl	ivision d lifton B	ent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Coconut Palms Beach Cottages Homeowners Association, Inc.

(Name of Corporation as currently f	iled with the Fl	lorida Dept, of State)		<u></u>	
	N110000	010145			
(Docum	ent Number of C	Corporation (if known)			
Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation		tes, this Florida Not F	or Profit Corporation	n adopts the following	
A. If amending name, enter the new name	of the corpora	ition:			
	NA			The new	
name must be distinguishable and contain th "Company" or "Co." may not be used in the		ation" or "incorporat	ed" or the abbreviat	ion "Corp." or "Inc."	
B. Enter new principal office address, if a (Principal office address MUST BE A STR)		<u> </u>	N/A		
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)			n/A		
D. If amending the registered agent and/o new registered agent and/or the new re			a, enter the name o	fthe SE	
Name of New Registered Agent.		NA		SEP CRET _AHA	75
New Registered Office Address:		(Florida street address)		-8 PM ARY OF SSEE, F	ARD ARD FILED
_	(City	, N/A	, Florida	(Zip Code DELETE 32	<u>`</u>
New Registered Agent's Signature, if chan I hereby accept the appointment as registere			ot the obligations of	> the position.	
 -	7	N. A.			
	Nonature of New	n Kegistered Agent it i	rnanging		

Page 1 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	V Mil	n Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Laura Imbriani	1982 State Road 44
Add			# 200
X Remove			New Smyrna Beach, FL 32168
2) Change	Р	Charles McQuillen	4001 Saxon Drive
Add			New Smyrna Beach, FL 32169
X Remove			
3) X Change	Р	Tony DeCamillis	1982 State Road 44
Add	- 12 - 12 21002 		# 200
Remove			New Smyrna Beach, FL 32168
4) Change	V	Craig Wales	4011 Saxon Drive
X			New Smyrna Beach, FL 32169
Remove			
5) Change	ST	Amanda Maier	4021 Saxon Drive
X Add			New Smyrna Beach, FL 32169
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)		
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	NA		
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The date of each amendment(s) adoption:	July 13, 2014	, if other than the
date this document was signed. Effective date if applicable:		
	o more than 90 days after amendment file date)	
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	
There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
Dated July Signature	y 31, 2014	
(By the chairman/or vi have not been selecte	ice chairman of the board, president of other officer-if directors d, by an incorporator – if in the hands of a receiver, trustee, or I fiduciary by that fiduciary)	
T	ony DeCamillis	
(Typed o	or printed name of person signing)	
	President	
	(Title of person signing)	