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COVER LETTER

TO: Amendment Section
Division of Corporations

2 Division of Corporation	15				:
NAME OF CORPORATION	TORTUGA VILLAS	CONDOMINIUM	ASSOCIATIC	N, INC.	
DOCUMENT NUMBER:	N12000010074				
The enclosed Articles of Am	endment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matter	r to the following:			
David Murphy					
	((Name of Contact Pe	rson)		
		(Firm/ Company	•		<u>.</u>
8126 Tollbridge Ct		(**************************************	,		
		(Address)			
West Chester, OH 45069					
	((City/ State and Zip (Code)		
pinkchickenami@gmail.com	n				
Е	-mail address: (to be used	for future annual rep	ort notification	٦)	
For further information conc	erning this matter, please o	call:			
David Murphy		at	513	205-9637	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Numb	er)
Enclosed is a cheek for the fo	ollowing amount made pay	vable to the Florida [Department of	State:	
≡ \$35 Filing Fee	□S43.75 Filing Fee & U Certificate of Status	□S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certit Certit	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
<u>Mailing A</u> Amendme			eet Address lendment Sect	ion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment



TORTUGA VILLAS CONDOMINIUM ASSOCIATION, INC.		i i i i i i i i i i i i i i i i i i i			
(Name of Corporation	as currently filed	l with the Florida De		21 77	
N12000010074		•	130 eres,	ستم الم	, D: 11 F
(Docum	ment Number of Co	orporation (it known)	<u> </u>	, (n)	
Pursuant to the provisions of section 617,1006, Floarmendment(s) to its Articles of Incorporation:	orida Statutes, this I	Florida Not For Profit	TALLANA Corporation :	EDAEAR) idopts the	LÕKiĐ <i>É</i> following
A. If amending name, enter the new name of th	e corporation:				
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		"incorporated" or the	e abbreviation	"Corp."	_The new or "Inc."
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET)					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX) 8126	Tollbridge Ct			
	West (Chester, OH 45069			
 If amending the registered agent and/or registered agent and/or the new register 	stered office addr	ess in Florida, enter t	he name of the	<u>e</u>	
Name of New Registered Agent:	NANCY SIMMONS				
	1654 GLEN ABE	BY LANE			
New Registered Office Address:	:	(Florida stre	et address)		
	WINTER HAVEN		, Florida	33881	
	(City	y	(Zip	Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	<mark>Registered Agent:</mark> nt I am familiar w	ith and accept the obli	igations of the	position	
	Nancy 3	Simmons of New Registered Ag			
_	Signature	of New Registered Ag	gent, if changin	.Ř	

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>Mik</u>	<u>i Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	OTHER	CARMEN MENENDEZ	201 CRANDON BLVD APT 823
Add			KEY BISCAYNE FL 33149
X Remove			
2) Change	T	David Murphy	8126 Tollbridge Ct
X Add			West Chester, OH 45069
Remove	P	Kira Murphy	8126 Tollbridge Ct
3) Change X Add			West Chester, OH 45069
Remove			
4) Change	<u> </u>	Mark Johnston	5984 Woodthrush Ln
X Add			West Chester, OH 45069
Remove			
51 Change	<u>S</u>	Sarah Johnston	5984 Woodthrush Ln
XAdd			West Chester, OH 45069
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles (attach additional sheets, if necessary). (Bo	e specific)			
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<u> </u>				
				
				
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	10/9/2019	
The date of each ame	ndment(s) adoption:	, if other than the
date this document was	signed.	
	10/9/2019	
Effective date if appli		
	(no more than 90 days after amendment file date)	
	ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Adoption of Amendm	tent(s) (<u>CHECK ONE</u>)	
The amendment(s was/were sufficier) was/were adopted by the members and the number of votes cast for the amendment(s) int for approval.	
There are no mem adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
Dated	10/9/2019	
Signature	David Murphy	
Č	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	David Murphy	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	