# N13000010330

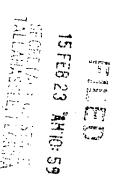
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### **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SW Florida Shellfish association, Inc.
DOCUMENT NUMBER: N 13 000010330
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scott T. White
(Name of Contact Person)
sw Florida Shellfish Ossociation, Inc.
(Firm/ Company)
POBOX 509
(Address)
St. James City, FL 33956-0509
(City/ State and Zip Code)
swhite@swflshellfish.org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott T. White at (Z39) 633 Z799
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$

## **Mailing Address**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

### Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed)

# Articles of Amendment to Articles of

Incorporation of

(Document Number of Corporation (if known)  arsuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corpo mendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  NA  A  The mending name is the distinguishable and contain the word "corporation" or "incorporated" or the abbre  Company" or "Co." may not be used in the name.	ration adopts the following
rsuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corpo nendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  N A  me must be distinguishable and contain the word "corporation" or "incorporated" or the abbre	ration adopts the following
endment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  N A  me must be distinguishable and contain the word "corporation" or "incorporated" or the abbre	eration adopts the following
N A me must be distinguishable and contain the word "corporation" or "incorporated" or the abbre	5 F
me must be distinguishable and contain the word "corporation" or "incorporated" or the abbre	370
me must be distinguishable and contain the word "corporation" or "incorporated" or the abbre ompany" or "Co." may not be used in the name.	- Ine new =
J .	viation "Corp." or "Inc."
Enter new principal office address, if applicable:	हुं हैं <b>हैं</b> े
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address in Florida, enter the namew registered agent and/or the new registered office address:  Name of New Registered Agent:	me of the
(Florida street address)  New Registered Office Address:	
, Florida	
(City)	(Zip Code)

Page 1 of 4

Signature of New Registered Agent, if changing

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 Doe X Remove V Mike Jones X Add SV Sally Smith Type of Action Title **Address** Name (Check One) Dave B. Herbott 4110 Lake Breeze Ln.
St. James City, Fr. 33956 1)  $\prec$ \_Add Remove 7421 Pinehurst Rd. Bokeelia, FL 3392Z Carter M. Davis 2)  $\times$  Add Remove 3) Change Add Remove 4) Change Add

(Attach additional sheets, if necessary)

Remove

Change

Add

Remove

5)

6)	Change
	Add
Remo	ve
	Page 2 of 4
E. <u>If</u>	Page 2 of 4  amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
(af	tach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption:
, if other than the date this document was signed.
Effective date if applicable: 2/19/2015
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 2/19/2015
Signature  (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)
Scott T. White  (Typed or printed name of person signing)  Secretary Treasurer
(Typed or printed name of person signing)
Secretary Treasurer
(Title of person signing)