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R. WHITE ESB 0 9 2021

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Arthur's Cap	ri Condominium Ind	<b>:</b>		
N14000006683	· ·			
DOCUMENT NUMBER:	<del></del>	<del></del>		
The enclosed Articles of Amendment and fee	are submitted for fil	ling.		
Please return all correspondence concerning the	nis matter to the foll	owing:		
Donald Gricco (President)				
	(Name of C	Contact Person)		
Arthur's Capri Condominium Inc				
	(Firm/	Company)	<del> </del>	<del></del> -
245 116th Avenue				
	(Ac	idress)		
Treasure Island FL 33706				
	(City/ State	and Zip Code)		
sohappydon@gmail.com				
E-mail address: (to	be used for future a	innual report notifica	tion)	
For further information concerning this matter	, please call:			
Donald Grieco (President)		727 at	455-4648	
(Name of Contact	Person)	(Area Code	e) (Daytime Telephor	ie Number)
Enclosed is a check for the following amount	made payable to the	Florida Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Certified	Copy Cer nal copy is Cer ) (Ac	2.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	
Mailing Address		Street Addres	<u>s</u>	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Arthur's Capri Condominium Inc

Arthur's Capri Condominium Inc		γ [" 1:5]
Name of Corporation as currently filed with the Florida	Dept. of State)	
N14000006683		
(Document Numl	per of Corporation (	if known)
Pursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this <i>Florida No</i>	t For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	tion" or "incorpor	ated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<ol> <li>If amending the registered agent and/or registered off new registered agent and/or the new registered office:</li> </ol>		ida, enter the name of the
Name of New Registered Agent:	<del> </del>	
New Projectored Office Address		(Florida street address)
<u>New Registered Office Address:</u>		
	(0)	, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and acc	cept the obligations of the position.
	ianature of New Re	vistered 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 X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>s</u>	Bryan Hanftwurzel	265 116th Avenue Treasure, Island, FL 33706
<ul> <li>X Remove</li> <li>2) Change</li> <li>X Add</li> </ul>	<u>\$</u>	Dawn Siciliano	265 116th Avenue Treasure, Island, FL 33706
Remove 3) Remove Add Remove	<del></del>		
4) Change Add			
Remove  5) Change Add			
Remove			
6) Change Add Remove			
		icles, enter change(s) here: (Be specific)	
	******		

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The date of each amendment(s) adoption: 12/23/2020 date this document was signed.	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date	·)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no member adopted by the board	rs or members entitled to vote on the amendment(s). The amendment(s) was/were l of directors.
Dated	2/23/2020
Signature	
ha	y the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Donald Grieco
	(Typed or printed name of person signing)
	President
	(Title of person signing)