N14000010681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 DEC 16 PM 2:06

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C LEWIS

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2015

KAREN THOMPSON / COCOA BEACH MAIN STREET INC
69 N. ORLANDO AVE.
COCOA BEACH, FL 32931 US

SUBJECT: COCOA BEACH MAIN STREET, INC.
Ref. Number: N14000010681

We have received your document for COCOA BEACH MAIN STREET, 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

Carolyn Lewis
Regulatory Specialist II

Letter Number: 315A00019215

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cocoa Beach Main Street, Inc.

DOCUMENT NUMBER: N14000010681

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Thompson/Marilyn Riggerman
(Name of Contact Person)

(Firm/ Company)

200 n 1st St
(Address)

Cocoa Beach FL 32931
(City/ State and Zip Code)

cocoabeachms@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Thompson at 321-613-0525
(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:

paid

☑ $35 Filing Fee ☐ $43.75 Filing Fee & Certificate of Status ☐ $43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ $52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

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

Articles of Amendment
to
Articles of Incorporation
of

DIVISION OF CORPORATIONS

15 DEC 16 PM 2:06

COCOA BEACH MAIN STREET, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N14000010681

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this ***Florida Not For Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. **If amending name, enter the new name of the corporation:**

_____ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. **Enter new principal office address, if applicable:**
(Principal office address MUST BE A STREET ADDRESS)

C. **Enter new mailing address, if applicable:**
(Mailing address MAY BE A POST OFFICE BOX)

Karen Thompson
200 N 1st St
Cocoa Beach, FL 32931

D. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address.**

Name of New Registered Agent: Karen Thompson

200 N 1st St
(Florida street address)

New Registered Office Address:

Cocoa Beach, Florida 32931
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

_____
Signature of New Registered 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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change	D	Karen Dooley	41 N Orlando Ave Cocoa Beach, FL 32931
___ Add			
X Remove			
2) ___ Change	D	Ann Pecarlo	1171a Riviere Rd Cocoa Beach, FL 32931
___ Add			
X Remove			
3) ___ Change	D	Joy Arnold	461 Watts Way Cocoa Beach, FL 32931
___ Add			
X Remove			
4) ___ Change	RA	Laird Cann	744 Bremerhaven St NW Palm Bay, FL 32907
___ Add			
X Remove			
5) ___ Change	D	Miles Jacovitz	211 Circle Dr Cape Canaveral, FL 32920
___ Add			
X Remove			
6) ___ Change	Treasurer	Marilyn Rigerman	200 N 1st St Cocoa Beach, FL 32931
X Add			
___ Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: October 1, 2015 if other than the date this document was signed.

Effective date if applicable: immediately 15 DEC 16 PM 2:06
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____

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)

Kara Thompson
(Typed or printed name of person signing)

Ex. Director
(Title of person signing)