N14000010681

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COCOA BEACH MA	AIN STREET, INC.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
PAT WATSON			
((Name of Contact Per	son)	
COCOA BEACH MAIN STREET INC			
	(Firm/ Company)		
PO BOX 320121			
	(Address)		
COCOA BEACH, FL 32931	,		
((City/ State and Zip C	ode)	
VICKI@TAYLORLOCKARD.COM			
E-mail address: (to be used	for future annual repo	rt notification)	
For further information concerning this matter, please of	call:		
PAT WATSON	at	321-258-5655	
(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	yable to the Florida De	epartment of St	tate:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certifie	ate of Status d Copy onal Copy is
Mailing Address		et Address	
Amendment Section Division of Corporations	Amendment Section		

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 to Articles of Incorporation of

COCOA BEACH MAIN STREET, INC

(Name of Corporation as	currently filed with the Florid	la Dept. of State)
N14000010681		•
(Document	Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "co"Company" or "Co." may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Capp" or thac.
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		AH SI
		in in in
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	PO BOX 320121	
	COCOA BEACH, FL	32932
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		nter the name of the
VI	VICTORIA I OCKARD	
Name of New Registered Agent:	60 S BANANA RIVER BLVD	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		ida street address)
-	ОСОА ВЕАСН	32931 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		echid.

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>	n <u>Doe</u> ce <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	TIM CHASTAIN	42 NORTH SHORE DRIVE
Add			COCOA BEACH, FL 32931
Remove			
2) X Change	. <u>VP</u>	ELLEN RUBINO	921 BALI ROAD
Add			COCOA BEACH, FL 32931
Remove	VP	ANTOINETTE PRISCO	34 FAIRWAY DRIVE
3) Change Add			COCOA BEACH, FL 32931
Remove			
4) X Change	<u>T</u>	COLLEEN BRYAN	765 S ATLANTIC AVE
Add			COCOA BEACH, FL 32931
Remove			
5) Change			
Add			
Remove			
6) Change	<u>- </u>		
Add			
Remove			

. <u>If amending or adding addit</u> (attach additional sheets, if ne	tional Articles, enter charcessary). (Be specific)	ange(s) here:		
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
		•		
			, . .	
				
	<u> </u>			

	JULY 12, 2016	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
JU	LY 12, 2016	
Effective date if applicable:	, , , , , , , , , , , , , , , , , , ,	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the I	clock does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.	
There are no members or meadopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
Dated July	Watson/	
~ +	airman or vice chairman of the board, president or other officer-if directors	
have not b	been selected, by an incorporator – if in the hands of a receiver, trustee, or t appointed fiduciary by that fiduciary)	
PAT W	/ATSON	
	(Typed or printed name of person signing)	
SECRI	ETARY	
	(Title of person signing)	