# N15000001798

| (R                      | equestor's Name)       |
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| (A                      | ddress)                |
| (A                      | ddress)                |
| (C                      | ity/State/Zip/Phone #) |
| PICK-UP                 | ☐ WAIT ☐ MAIL          |
| (В                      | usiness Entity Name)   |
| (D                      | ocument Number)        |
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SEGRETARY OF STAIL DIVISION OF CORPORALIONS

JUL 7 2015 C LEWIS

# **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

| NAME OF CORPORATION           | Bay Street Dock Ass                         | ociation, Inc.   |                    |  |
|-------------------------------|---|--|--------------------|--|
|                               | N15000001798                                |  |                    |  |
| DOCUMENT NUMBER:              |   |  |                    |  |
| The enclosed Articles of An   | nendment and fee are sub                    | mitted for filing.   |                    |  |
| Please return all corresponde | ence concerning this matte                  | er to the following:   |                    |  |
| Christine Stonebridge         |   |  |                    |  |
|                               |   | (Name of Contact Perso   | on)                |  |
| Bay Street Dock Association   | n, Inc.                                     |  |                    |  |
|                               |   | (Firm/ Company)  |                    |  |
| 211 14th Avenue, N.W.         |   |  |                    |  |
|                               |   | (Address)  | *****              |  |
| Naples, FL 34120              |   |  |                    |  |
|                               |   | (City/ State and Zip Cod   | de)                |  |
| Chris.Stonebridge@cnrair.c    | om  |  |                    |  |
| 1                             | -mail address: (to be used                  | for future annual report   | notification       | )  |
| For further information cond  | erning this matter, please                  | call:  |                    |  |
| Christine Stonebridge         |   |  | 39-455-5972        |  |
|                               | (Name of Contact Person                     | 1) (/  | (rea Code          | (Daytime Telephone Number)                                       |
| Enclosed is a check for the   | Collowing amount made pa                    | nyable to the Florida Dep  | partment of S      | State:   |
| ■ \$35 Filing Fee             | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fce & Certified Copy (Additional copy is enclosed) | Certifi<br>Certifi | Filing Fee<br>cate of Status<br>ed Copy<br>ional Copy is<br>sed) |

# 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



| Bay Street Dock Association, Inc.  |                                       |  |  |
|--|---------------------------------------|--|--|
| (Name of Corporation as curren   | tly filed with the Florids            | Dept. of State)                                  |  |
| N15000001798   |                                       |  |  |
| (Document Numb   | er of Corporation (if know            | wn)  |  |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:         |                                       | Profit Corporation adopts the following          |  |
| A. If amending name, enter the new name of the corporat  | <u>ion:</u>                           |  |  |
| name must be distinguishable and contain the word "corpora<br>"Company" or "Co." may not be used in the name.          | tion" or "incorporated" (             | The new<br>or the abbreviation "Corp." or "Inc." |  |
| •  | c/o Wellbaum & Emery, PA              |  |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)              | (S) 686 N. Indiana Ave.               |  |  |
|  | Englewood, FL 34223                   |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                | P.O. Box 444                          |  |  |
|  | Placida, FL 33946                     |  |  |
|  |                                       |  |  |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a |                                       | ter the name of the                              |  |
| Name of New Registered Agent:  |                                       |  |  |
|  | (Flori                                | da street address)                               |  |
| New Registered Office Address:   |                                       |  |  |
|  | /O: 1                                 | Florida  |  |
|  | (City)                                | (Zip Code)                                       |  |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa  | l Agent:<br>miliar with and accept th | e obligations of the position.                   |  |
|  | Signatura of Nav. Booiston            | ad (acut if abanaina                             |  |

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<br>V Mike<br>SV Sally | <u>Doe</u><br><u>Jones</u><br><u>Smith</u> |                 |
|----------------------------------|-------------------------------|--|-----------------|
| Type of Action<br>(Check One)    | <u>Title</u>                  | <u>Name</u>                                | <u>Addres</u> s |
| 1) Change Add Remove             |                               | ······································     |                 |
| 2) Change Add                    |                               |  |                 |
| Remove 3 ) Change Add            |                               |  |                 |
| Remove 4) Change Add Remove      |                               |  |                 |
| 5) Change Add Remove             |                               |  |                 |
| 6) Change Add Remove             | <del></del>                   |  |                 |
|                                  |                               |  |                 |

| Lif amending or adding additional (attach additional sheets, if necessar | y). (Be specific) |              |   |        |  |
|--|-------------------|--------------|---|--------|--|
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|  | ¥*                |              |   | ,      |  |
|  |                   |              |   |        |  |

| February 19, 2015 The date of each amendment(s) adoption:  | FILED if other than the                 |
|--|---|
| date this document was signed.   | SECRETARY OF STANDAS                    |
| February 19, 2015 Effective date if applicable:  |   |
| (no more than 90 days after amendment file date)   | 15 JUN 26 PM 1: 16                      |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.                                     | ts, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |   |
| ■ The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.  | amendment(s)                            |
| There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors.   | (s) was/were                            |
| Dated June 22, 2015  |   |
| Signature  |   |
| (By the chairman or vice chairman of the board, president or other office have not been selected, by an incorporator – if in the hands of a receive other court appointed fiductary by that fiduciary) |   |
| Christine Stonebridge  |   |
| (Typed or printed name of person signing)  |   |
| President  |   |
| (Title of person signing)  |   |