N15000002748

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	Beaches Oktoberfest, Inc.
DOCUMENT NUMBER: _	N15000002748
The enclosed Articles of Ame	endment and fee are submitted for filing.
Please return all corresponde	nce concerning this matter to the following:
Joshua A. Woolsey	
	(Name of Contact Person)
Beaches Oktoberfest, Inc.	
	(Firm/ Company)
4925 Beach Blvd	
	(Address)
Jacksonville, Florida 32207	
	(City/ State and Zip Code)
josh@woolseylawfirm.com	
E-	mail address: (to be used for future annual report notification)
For further information conce	rning this matter, please call:
	at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made payable to the Florida Department of State:
■ \$35 Filing Fee	□S43.75 Filing Fee & □S43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) 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

Beaches Oktoberfest, Inc.	.3 . 61 . 3 . 1.3	L. El. (L. D CC()	
(<u>Name of Corporation as curren</u> N15000002748	tly filed with	ne Florida Dept. of State)	
(Document Numb	er of Corporati	on (if known)	
ursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	s, this <i>Florida</i>	Not For Profit Corporation adopts	the following
. If amending name, enter the new name of the corporati	ion:		_
ame must be distinguishable and contain the word "corporat Company" or "Co." may not be used in the name.	tion" or "incor	porated" or the abbreviation "Cor	prior "Ma"
. Enter new principal office address, if applicable:		Blvd., Jacksonville, Florida 32207	355
Principal office address <u>MUST BE A STREET ADDRESS</u>)	l		المبادية
		· · · · · · · · · · · · · · · · · · ·	- 10万 つる
			<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4925 Beach I	Blvd., Jacksonville, Florida 32207	-
			
	 		
. If amending the registered agent and/or registered offic	e address in l	Florida, enter the name of the	
new registered agent and/or the new registered office a	ddress:	ionian, once the name of the	
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code,)
ew Registered Agent's Signature, if changing Registered	Agent:		
hereby accept the appointment as registered agent. I am far		accept the obligations of the positi	on.
Si	gnature of Ne	w 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 X Remove X Add	PT John D V Mike J SV Sally S	lones_	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Presiden	Phillip Vogelsang	1301 Riverplace Blvd., Suite 1500
Add			Jacksonville, Florida 32207
X Remove			
2) Change	Treasure	Keith Doherty	1301 Riverplace Blvd. Suite 1500
Add			Jacksonville, Florida 32207
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)															
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(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, document's effective date on the Department of State's records.	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 an was/were sufficient for approval.	nendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were
Dated 1/16/17	
Signature	
(By the chairman or vice chairman of the board, president or other officer- have not been selected, by an incorporator — if in the hands of a receiver, to other court appointed fiduciary by that fiduciary)	
Joshua A. Woolsey	
(Typed or printed name of person signing)	
Secretary and Chairman	
(Title of person signing)	