

N15000011159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

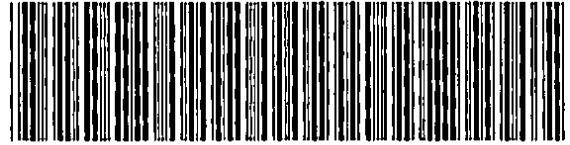
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700329392857

05/20/19--01016--017 \*\*35.00

R WHITE

JUL 23 2019

2019 JUL 23 AM 11:55

500 30

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Seasiders of Palm Beach Shores, Inc.

DOCUMENT NUMBER: N15000011159

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

Please return all correspondence concerning this matter to the following:

Mrs. Kathy Ramsey  
(Name of Contact Person)

(Firm/ Company)

33 Ocean Ave #409

(Address)

Palm Beach Shores, FL 33404

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Kathy Ramsey  
(Name of Contact Person)

at 850-322-8361  
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 4, 2019

MRS. KATHY RAMSEY  
33 OCEAN AVE #409  
PALM BEACH SHORES, FL 33404

SUBJECT: SEASIDERS OF PALM BEACH SHORES INC.  
Ref. Number: N15000011159

We have received your document for SEASIDERS OF PALM BEACH SHORES 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 date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed in #11 of this form.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Rebekah White  
Regulatory Specialist III

Letter Number: 319A00011132

Articles of Amendment  
to  
Articles of Incorporation

FILED

2013 JUL 23 AM 11:54

Seasiders of Palm Beach Shores, Inc.

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

N15000011159

(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)

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:

Kathy Ramsey

33 Ocean Ave #409

(Florida street address)

New Registered Office Address:

Palm Beach Shores

(City)

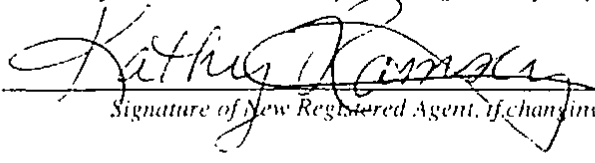
Florida

33404

(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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
--------------------------------------	--------------	-------------	----------------

1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Chris Mielke</u>	<u>111 Blossom Lane<sup>7</sup></u> <u>Palm Beach Shores FL</u> <u>33404</u>
--	----------	---------------------	--

2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Sue Franklin</u>	
--	-----------	---------------------	--

3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Marie Reid</u>	
--	----------	-------------------	--

4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Georgette Kauhane</u>	
--	----------	--------------------------	--

5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Maura DeRueil</u>	
--	----------	----------------------	--

6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Kathy Ramsey</u>	<u>33 Ocean Ave #40</u> <u>Palm Beach Shores, FL</u> <u>33404</u>
--	----------	---------------------	---

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

1) ☐ Change Asst. T Judy Craddock \_\_\_\_\_  
☐ Add \_\_\_\_\_  
☒ Remove \_\_\_\_\_

2) ☐ Change D Joan Mills \_\_\_\_\_  
☐ Add \_\_\_\_\_  
☒ Remove \_\_\_\_\_

3) ☐ Change Past P Joan Reilly \_\_\_\_\_  
☐ Add \_\_\_\_\_  
☒ Remove \_\_\_\_\_

4) ☐ Change V Lori Kollmeyer 312 Cascade Lane  
☒ Add Palm Beach Shores, FL  
☐ Remove 33404

5) ☐ Change S Nancy Cogger 225 Inlet Way  
☒ Add Palm Beach Shores, FL  
☐ Remove 33404

6) ☐ Change S Kendra Zizzamia 224 Bravado Lar  
☒ Add Palm Beach Shores, FL  
☐ Remove 33404

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

N/A

The date of each amendment(s) adoption: ~~N/A~~ 05/02/19, if other than the date this document was signed.

Effective date if applicable: ~~N/A~~ 06/01/19  
(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 06/09/19

Signature Kathy Ramsey  
(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)

Kathy Ramsey  
(Typed or printed name of person signing)

Treasurer  
(Title of person signing)