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C. GOLDEN

JUL 1 3 2019

## COVER LETTER

TO: Amendment Section Division of Corporations						_	Λ
NAME OF CORPORATION: _	Eau	Gallie	Boulevard	Building	#8	Condominium	Associat Inc.
IXXUMENT NUMBER:			006600	······································	<del></del>		
The enclosed Articles of Amendme	ent and fee are s	ubmitted for filing					
Please return all correspondence co	neeming this m	atter to the followi	ng				
Ste	Phen	Name of Conf	act Person)		<del></del>		
	Farm	Buseau (Firm' Co)	Insurance	<del>.</del>			
397.	2 W.	Eau (Addre	Gallie Blva	' Ste f	<u>}</u>		
Mei	bourne	(City/ State and	3,4934 1 Zip Code)				
F-mail a			C Afbic pal report notification)	.com			
For further information concerning	this matter, plea	se call:					
Stephen	1 Ru of Contact Pers	snak on)	_at	36-4361 ne Telephone Number)			
Enclosed is a check for the following	ig amount made	payable to the Flo	orida Department of State:				
S35 Filing Fee	3.75 Filing Fee rtilicate of Statu	& □\$43.75 Filings  Certified Con (Additional of enclosed)	py Certificate of S	tatus	*		
Mailing Addrey Amendment Sect Division of Corp P.O. Box 6327 Tallabasser, FL.	on orations		Street Address Amendment Section Division of Corporations Clifton Building 2661 Eventive Center Cir	r le			

Tallahassee, FL 32301

RECEIVED

## Articles of Amendment

Articles of Incorporation

Eau Gallie Boulevard Building #8 Condominium Association, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
N 1600000 2200
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Curporation 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)
<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  3972 W. Eau Gallie Blvd Ste A
Melbourne FL 32934
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: Stephen Rusnak
3972 W. Eau Gallie Blud Ste A
(Florida street address)
New Regulered Office Address:
Melbourne Florida 32934
(City) (Yap Code)
New Registered Agent's Signature, if changing Registered Agent; Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

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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= Trusiee; 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		Doc Jones Smith	
Type of Action (Check One)	Tide	Name	Address
1)Change	<u>PD</u>	Kim R. Welsh	
AddRemove			
2) Change	<u>SD</u>	Philip Welsh	
Add  Remove  Change  Add	PD	Stephen Rusink	3972 W. Eau Gallie Buci Ste A Melborcae FL 32934
Remove 4) Change Add Remove	SD	Clay King	3972 W. Euw Gallie Blod Ste D Melbeume FL 32934
5) Change Add Remove		<del></del>	
6) Change Add Remove	<del></del>	<del></del>	
		Page 2 of 4	

(famending or adding additional Articles, attach additional sheets, if necessary). (He					
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The date of each amendment(s) adoption date this document was signed.	if other that
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
☐ There are no members or members or adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were
Dated	13/19
Signature X	Mark
	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or
	nted fidueiary by that tiduciary)
	Street Aveins
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)