

N16 000029045

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(City/State/Zip/Phone #)

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2016 NOV 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/29/16

**BECKER &
POLIAKOFF**

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1 East Broward Blvd., Suite 1800
Ft. Lauderdale, Florida 33301

November 3, 2016

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

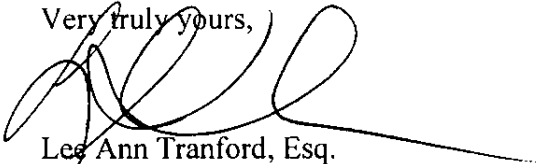
Re: Blue Seas Living Condominium Association, Inc.
Document No. N16000009045
Client/Matter No. B21610/375131

Dear Sir or Madam:

Enclosed are Articles of Amendment for the above-referenced corporation. Also enclosed is your fee in the amount of \$35.00.

Please return all correspondence concerning this matter to the undersigned.

Very truly yours,



Lee Ann Tranford, Esq.

LAT/cz

ACTIVE: 9098636_1
11/3/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2016

LEE ANN TRANFORD
1 EAST BROWARD BLVD., STE 1800
FT. LAUDERDALE, FL 33301

SUBJECT: BLUE SEAS LIVING CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N16000009045

We have received your document for BLUE SEAS LIVING CONDOMINIUM ASSOCIATION, 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).

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 316A00024051

Articles of Amendment
to
Articles of Incorporation
of

Blue Seas Living Condominium Association, Inc.

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

N16000009045

(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/o TDSunshine Property Management

1868 N. University Drive, Suite 205

Plantation, FL 33322

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

c/o TDSunshine Property Management

1868 N. University Drive, Suite 205

Plantation, FL 33322

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:

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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 type="checkbox"/> Change	<u>D</u>	<u>Gary A. Pache II</u>	<u>4431 NE 24th Avenue</u>
<input type="checkbox"/> Add			<u>Lighthouse Point, FL 33064</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Lester Dupuis</u>	<u>1868 N. University Drive, Suite 20</u>
<input checked="" type="checkbox"/> Add			<u>Plantation, FL 33322</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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: October 26, 2016, if other than the date this document was signed.


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, 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 26 of October 2016

Signature 
(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)

Stefan Olsson
(Typed or printed name of person signing)

President
(Title of person signing)