N17000000279

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section Division of Corporations Para Save are Beaches, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sora ORay Save of Beaches, Inc. Beach FL 33431 E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person)

(Name of Contact Person)

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & **□**\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (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

Enclosed)

Articles of Amendment to Articles of Incorporation of

 -	ently filed with the Florida Dept. of S	
Borg Save OW	Seaches Inc.	N17000000279
(Document Nurr	nber of Corporation (if known)	
Pursuant to the provisions of section 617,1006. Florida Statumendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit Corp</i> o	oration adopts the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>	
VILCA		The new
name must be distinguishable and contain the word "corpor" Company" or "Co." may not be used in the name.	cation" or "incorporated" or the abbr	eviation "Corp." or "Inc."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRES</u> .	\underline{S}	
		>2 &
Enter new mailing address, if applicable:	r: ia	SE D
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>
		<u> </u>
If amending the registered agent and/or registered of new registered agent and/or the new registered office	fice address in Florida, enter the na	me of the
Name of New Registered Agent: V	[0]	
	(Florida street addr	ent
<u>New Registered Office Address:</u> V	7/0	
<u></u>	(Civ)	_, Florida
	14 11/1	(ingression)
New Registered Agent's Signature, if changing Registere Thereby accept the appointment as registered agent. I am j	ed Agent: familiar with and accept the obligation	us of the position.
	NIO	
	Cianatana of Many Pagintarad Agant in	Cohamina

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	$\overline{\underline{V}}$ $\overline{\underline{Mi}}$	nn Doc ke Jones lly Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1) Change	D_	Unatran !	Davison	722 SW 24	Hn Ave
Add Remove				Boynton Bear 33435	
2) Change	\overline{D}	David Se	xgi	599 NE 46.	bSt.
Add Remove	_	\		A <u>Pt 104</u> Bo <u>ca Raton, FL</u>	
3) X Change	PISD	Jessica	Gray	55 SE ZND Delray Beach	
Add Remove				33431	
4)Change					
Add					
5) Change					
Add				<u>-</u>	
Remove					
6) Change		<u> </u>	<u> </u>	-	<u></u>
Add					
Remove			Page 2 of 4		

E. If amending or ad (attach additional s	ding additional Articles heets, if necessary). (B	s, enter change(s) le specific)	<u>here</u> :		
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	- "-				
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The date of each amendment(s) adoption: 7/14/2017	, if other than the
fate this document was signed. Effective date if applicable: 7/14/2017	
(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 document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes east 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 7/14/17	
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)	
USSICA GRAU (Typed or printed name of person signing)	
(Typed of prinadenance of person signing)	
Founder - Director	
(Title of person signing)	