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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Miraby Preservation Allience, Inc.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gary W. Nicholson
V. P. (Name of Contact Person)
(Firm/ Company)
432 I, /c b.y Dr. (Address)
(Address)
Αρ. // Βες ιζ Γζ 73572 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address? (to be used for future annual report notification)
For further information concerning this matter, please call:
Cary W. Nicholson at 813 503 - 5979 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) \$52.50 Filing Fee Certificate of Status 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

SECRETARY OF STAIR DIVISION OF CORPORATIONS

	SAIT MAD IC AM IO. O
Mirabin Prisery	with the Florida Dept. of State
(Name of Corporation as currently filed	with the Florida Dept. of State)
(Document Number of Cor	788
(Document Number of Cor	poration (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this Flamendment(s) to its Articles of Incorporation:	lorida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
The Seavall Preserati	on Alliance Inc. The new
name must be distinguishable and contain the word "corporation" or "Company" or "Co." may not be used in the name. Pricera	"incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 addre	er in Florido, outor the name of the
new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent:	
rame of New Negation to Algeria.	
	(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 wi	th 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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>s</u>	Robert Colling	437 Mirabry Blux Apulla Brack FC 33572
2) Change Add Remove	T	Robert (ribbs	Islan Dr Apollo Beach, Fe 33572
3) Change Add Remove			
4) Change Add Remove	- 2 1111 - 11 - 2		
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)				
			<u> </u>	
			972	
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The date of each amendment late this document was signe		, if other than the
Effective date <u>if applicable</u> :	: 3-14-17 (no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the approval.	mendment(s)
There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) f directors.) was/were
Dated	3-14=17	
Signature	36.6-	
have	ne chairman or vice chairman of the board, president or other officer not been selected, by an incorporator — if in the hands of a receiver, r court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(1) pool of praises maine or person digining)	
*****	Vice President	
	(Title of person signing)	1