# NITOXXIIBAO

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Cir	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
	J. HORNE	
	SEP 1 9 2022	

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

RECEIVED

CECRETARY OF UNIT

# EAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Inlet Palms Owners As	ssociation Inc	c	
<del></del>			
			Art of Inc. File
			LTD Purtnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature	<u> </u>	<del></del>	Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by: SETH	00/13/20		UCC 1 or 3 File
	09/14/22		UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

#### **COVER LETTER**

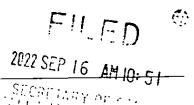
TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	Inlet Palms Owners ON:	Association, Inc.		
	N17000011826			
DOCUMENT NUMBER:				—
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	er to the following:		
Dawn Kelly Lenfest				
		(Name of Contact Person	n)	
		(Firm/ Company)		
		(Firm/ Company)		
1502 Seaway Drive, Box #	7			
	<u>-</u>	(Address)		
Fort Pierce, Florida 34949				
		(City/ State and Zip Cod-	e)	
dawnkellylen@hushmail.co	om			
	E-mail address: (to be use	d for future annual report	notification)	
For further information con	cerning this matter, please	e call:		
Dawn Kelly Lenfest		at	rea Code) (Daytime Telephone Number)	
-	(Name of Contact Person	1) (Aı	ea Code) (Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing .	<del></del>		Address Iment Section	
A mandin	ant Section	ALDECTE	mich SCCIIVII	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida	Dept. of State)	SECRETARY OF CAL			
Inlet Palms Owners Association, Inc. Document number	N17000011826	751 AMASSE 5/17 (*)			
(Document Numb	per of Corporation (if kr	nown)			
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following			
A. If amending name, enter the new name of the corpora	tion:				
	<del></del>	The new			
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ntion" or "incorporated	or the abbreviation Corp. or mc.			
B. Enter new principal office address, if applicable:	1502 Seaway Drive,	Box #7			
(Principal office address MUST BE A STREET ADDRESS	DDRESS) Fort Pierce, Florida 34949				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	1502 Scaway Drive,	Box #7			
	Fort Pierce, Florida 34949				
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	ice address in Florida, address:	enter the name of the			
Dawn K	elly Lenfest				
Name of New Registered Agent: 1470 Sea	away Drive, #4				
	<u> </u>	'orıda street address)			
New Registered Office Address:		24240			
Fort Pier		, Florida			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered	l Agent:	al All - minus of the monition			
I hereby accept the appointment as registered agent. I am fo	Vaux Hil	Ry-Kirlest			
	Signature of New Regist	erell 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:
(Artach additional sheets if necessary)

(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	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	P/D	Joseph M. Foglia	VERO BEACH, FL 32960
<ul> <li>Remove</li> <li>Change</li> <li>Add</li> </ul>	S/D	Joseph D. Grosso, Jr.	850 NW FEDERAL HWY, 236 STUART, FL 34994
x Remove 3) Change x Add Remove	VP/D	Arne Rabiner	1502 Seaway Drive, Box #7 Fort Pierce, Florida 34949
4) Change Add	<u>P/D</u>	Dawn Kelly Lenfest	Fort Pierce, Florida 34949
Remove  5)Change  ×Add	<u>D</u>	Martin Mohr	1502 Scaway Drive, Box #7 Fort Pierce, Florida 34949
Remove 6) Change Add			
E. If amending or add (attach additional sh		rticles, enter change(s) here: . (Be specific)	

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						<del>-</del>
	July 2	7, 2022			if ot	her than the
The date of each amendment(	s) adoption:			<del></del>	, 11 Qu	ici man me
date this document was signed.						
	Iuly 27, 2022					
Effective date if applicable:	July 27, 2022 (no more					
	(no more	than 90 days aft	er amendment f	île date)		
Note: If the date inserted in this	s block does not me	et the applicable	statutory filing	requirements, this	date will not be liste	d as the
document's effective date on the	Panartment of Ste	ite's records				
document's effective date on the	. Deharmient of Sta	ne a records.				
	(0111)	NZ ZNATON				
Adoption of Amendment(s)	(CHEC	EK 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 membe adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were
•	adopted by the boart	2 / /
	Dated	4/13/33
		War hall dellest
	Signature _	William of the state of the sta
	h.	the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
		Dawn Kelly Lenfest
		(Typed or printed name of person signing)
		President
		(Title of person signing)

#### INLET PALMS OWNERS ASSOCIATION, INC.

#### **DOCUMENT NUMBER N17000011826**

#### RESIGNATION OF JOSEPH M. FOGLIA

Effective immediately, I hereby tender my resignation as DIRECTOR and PRESIDENT of the Inlet Palms Owners Association, Inc., and from each and every office held in connection therewith.

Dated July 27, 2022

Joseph M. Foglia

Director President

### INLET PALMS OWNERS ASSOCIATION, INC.

#### **DOCUMENT NUMBER N17000011826**

## RESIGNATION OF JOSEPH D. GROSSO, JR

Effective immediately, I hereby tender my resignation as DIRECTOR and SECRETARY of the Inlet Palms Owners Association, Inc., and from each and every office held in connection therewith.

Dated July 27, 2022.

Joseph D. Grosso, Jr.

Director Secretary