N17000011825

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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	. Johns Owners Associa	tion, Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Christine Haroldsonn			
	(Name of Contact Per	son)	
c/o Dolphin Cove of St. Johns Owners Association,	Inc.		
	(Firm/ Company)	 .	
170 Sailfish Drive			
**	(Address)		
Ponte Vedra Beach, FL 32082			
	(City/ State and Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·
c.haroldsonn@sbcglobal.net			
E-mail address: (to be used	d for future annual repo	rt notificatio	n)
For further information concerning this matter, please	call:		
Christine Haroldsonn		15	244-9024
(Name of Contact Person	at	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida De	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section	Stree	et Address	
Amendment Section Division of Corporations		ndment Secti	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Dolphin Cove of St. Johns Owners Association, Inc.

(Name of Corporation as currently filed with th N17000011828	he Florida I	Dept. of State)	
	ment Numb	er of Corporation (i	if known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:		·	·
A. If amending name, enter the new name of the	he corporati	on:	
			The n
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam		ion" or "incorpora	ated" or the abbreviation "Corp." or "Inc
B. Enter new principal office address, if applications	able:	c/o Christine Haro	oldsonn
(Principal office address MUST BE A STREET)		170 Sailfish Drive	2
		Ponte Vedra Beach	h, FL 32082
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	: <i>BOX</i>)	c/o Christine Haro	oldsonn
		170 Sailfish Drive	
		Ponte Vedra Beac	ch, FL 32082
D. If amending the registered agent and/or reg			da, enter the name of the
new registered agent and/or the new register			
Name of New Registered Agent:	Christine	Haroldsonn	
	170 Sailfis	h Drive	
New Registered Office Address	(Florida street address)		
New Negistered Office Address.	Ponte Ved	ra Beach	, Florida 32082
		(City)	(Zip Code)
New Registered Agent's Signature, if changing land the second second the appointment as registered agent the appointment as registered agent.	nt. I am fan	niliar with and acce	o blem
	Sig	nature of New Reg.	istered 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 A Add		Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	John B. Towers	5875 Mining Terrace, Unit 206 Jacksonville, FL 32257
 Remove Change Add 	VP/T	William B. Towers	5875 Mining Terrace, Unit 206 Jacksonville, FL 32257
* Remove 3) Change Add Remove	<u>S</u>	James D. Watson	5875 Mining Terrace, Unit 206 Jacksonville, FL 32257
4) Change Add	<u>P</u>	Christine Haroldsonn	170 Sailfish Drive Ponte Vedra Beach, FL 32082
Remove 5) Change Add	VP	Britney Barrow	177 Sailfish Drive Ponte Vedra Beach, FL 32082
Remove Change Add	<u>S/T</u>	Wasim Munayyer	210 Sailfish Drive Ponte Vedra Beach, FL 32082
Remove E. If amending or addi (attach additional she		rticles, enter change(s) here: (Be specific)	

		
		
		
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The date of each amendment(s) adopt date this document was signed.	ion;	, if other than the
Effective date <u>if applicable</u> : 5/1/2020		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Depart	loes not meet the applicable statutory filing requirements, this date will not ment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

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 22 April 2020 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)
Christine Haroldsonn
(Typed or printed name of person signing)
President
(Title of person signing)