

# N1800000315643585

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ISLAND STORAGE SUITES PROPERTY OWNERS ASSOCIATION, I

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Articles of Amendment  
to  
Articles of Incorporation  
of

Island Storage Suites Property Owners Association, Inc.

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

N18000005585

(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)

1031 Aqua Lane

Fort Myers, FL 33919

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1031 Aqua Lane

Fort Myers, FL 33919

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:

Scott Allan

1031 Aqua Lane

(Florida street address)

New Registered Office Address:

Fort Myers

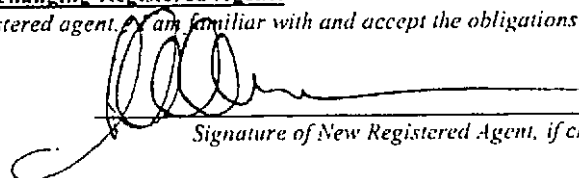
(City)

Florida 33919

(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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JACKSONVILLE, 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 <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>P, D, S</u>	<u>David Kienle</u>	<u>5424 Shearwater Dr.</u> <u>Sanibel, FL 33957 (11)</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>P</u>	<u>Scott Allan</u>	<u>1031 Aqua Lane</u> <u>Fort Myers, FL 33919</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Vita Allan</u>	<u>1031 Aqua Lane</u> <u>Fort Myers, FL 33919</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S/T</u>	<u>Carlos Vazquez</u>	<u>1031 Aqua Lane</u> <u>Fort Myers, FL 33919</u>
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			

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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ST. PETERS COUNTY, FL  
CLERK OF CIRCUIT COURT

From: Rich Valente Fax: 603-255-1543

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ST. LOUIS, MO  
FBI

Effective date if applicable: December 19, 2019  
(no more than 90 days after amendment file date)

**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.

7200000015640

- ☒ 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 January 27, 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)

Scott Allan

(Typed or printed name of person signing)

President

(Title of person signing)

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