N18064

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SECRETARY OF STATE

11/20/20



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	SLAND ASSOCIATIO	N. INC.	
DOCUMENT NUMBER: N18064		_	
The enclosed Articles of Amendment and fee are s	submitted for filing.	-	
Please return all correspondence concerning this m	natter to the following:		
Nicholas V. Pulignano, Jr.			
	(Name of Contact P	Person)	
Marks Gray, P.A.			
	(Firm/ Compan	y)	
1200 Riverplace Blvd., Suite 800			
	(Address)	<u> </u>	
Jacksonville, FL 32207			
-	(City/ State and Zip	Code)	
nvp@marksgray.com			
E-mail address: (to be u	sed for future annual rep	port notification	1)
For further information concerning this matter, plea	nse call:		
Nicholas V. Pulignano, Jr.	at	904	807-2105
(Name of Contact Pers	on)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		reet Address nendment Section	on

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

FILED

THE ORTEGA ISLAND ASSOCIATION, INC.

2020 OCT 14 PM 4: 06

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	SECRETARY OF STATE
1)8064		SECRETARY OF STATE TALLAHASSES, FL
(Document)	Number of Corporation (if kno	own)
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporated"	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</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 new registered agent and/or the new registered off	<u>l office address in Florida, e</u> fice address:	nter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flori	da street address)
	(City)	, Florida (Zip Code)
Name Designation of Association of Communication of the Communication of	•	τειρ σομέ)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a	ered Agent: m familiar with and accept th	e obligations of the position.
	1" - ZM B	
	Signature of New Registere	ed 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	$\frac{PT}{\underline{V}}$ \underline{SV}	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
t) Change Add	<u>P</u>	Ivonne Robbins	4575 ORTEGA ISLAND DRIVE Jacksonville, FL 32210
xRemove			
2) Change Add	<u>P</u>	Keith Townsend	4590 ORTEGA ISLAND DRIVE Jacksonville, FL 32210
Remove 3) Change Add Remove		-	
4) Change Add	<u>-</u>		
Remove			
5) Change Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
F. If amonding on addin	مانداداد	and A markets are also as a second	
(attach additional sheet	g addition ts, if neces	nal Articles, enter change(s) here: sary). (Be specific)	
			<u> </u>
-	<u>-</u>		

<u>_</u>		
The date of each amendment(s) addate this document was signed.	option: if other that	an the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	_
Note: If the date inserted in this blo document's effective date on the De	k does not meet the applicable statutory filing requirements, this date will not be listed as thartment of State's records.	1e
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	

J	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
	October 5, 2020 Dated
	Signature Mulda V! Pullenco J
	(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)
	Nicholas V. Pulignano, Jr.
	(Typed or printed name of person signing)
	Vice President / Treasurer
	(Title of person signing)