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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PAVESE LAW FIRM

Account Number : I20130000057

Phone : (239)334-2195

Fax Number : (239)332-2243

Enter the email address for this business entity to be used for future in account property and property annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN ISLAND STORAGE SUITES CONDOMINIUM OWNERS ASSOCIATION

Certificate of Status	.0
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Corporate Filing Menu

Help

O SIMMONS

Articles of Amendment Articles of Incorporation

Island Storage Suites Condominium Owners Asso	ciation, Inc	. .			
Name of Corporation as currently filed with the	e Florida	Dept. of State)			
N19000000233					
(Docum	nent Numb	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Flo smendment(s) to its Articles of Incorporation:	rida Statut	es, this <i>Florida Not For Profit Corporat</i>	<i>ion</i> adopt	s the follow	ving
A. <u>If amending name, enter the new name of th</u>	e corporal	<u>ion:</u>			
name must be distinguishable and consain the wors "Company" or "Co." may not be used in the nam		tion" or "incorporated" or the abbrevia	tion "Cor	The i p. " or "lac	
	_	10950 Old South Way	-		
B. Enter new principal office address. If suplicable: (Principal office address <u>MUST RE A STREET ADDRESS</u>)		Fort Myers, FL 33908			– 2
				TAHLAHI	NAC 020Z
C. Enter new mailing address. If applicable: (Mailing address MAY BE A POST OFFICE BO.		1031 Aqua Lane			
<u> </u>		Port Myers, FL 33919		38 <u>5</u>	PH
				in co	_ <u>~</u>
D. If amending the registered agent and/or real new registered agent and/or the new register	stered off red office.	ice address in Florida, enter the name	of the	AIE	ည
Name of New Registered Agent:	Scott Ali	BIN			
	1031 Aqu	in Lane			
New Registered Office Address:	:	(Florida stress aktivess)			
	Fort Mye	n	lorida)19	
		(City)	(Zip Code	ý	
New Resistered Ascent's Signature. If changing I hereby accept the appointment as registered ages		Guillian ofth and accept the obligations of		ion.	
	/	Ignature of New Registered Agent, if cha	aling		

Page 1 of 4

If assending 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 officeridirector 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 Pinancial Officer. If an officer/director holds more than one title, list the first letter of each officeheld. 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 Dos. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add		Doc Lones Smith	2020 SEC TA
Type of Action (Check One)	Title	Name	2020 JAN - 7 R
l) Change Add	PRES	David W. Kienzie	Sanibel, FL 33957
Remove Change Add	PRES	Scott Allan	1031 Aqua Lane Fort Myers, FL 33919
X Remove 3) Change Add Remove	<u>\$/T</u>	Susan Smart Kienzie	5424 Shearwater Drive Santhel, FL 33957
4) Change Add	VP	Vita Allan	Fort Myers, FL 33919
Remove 5) Change X Add	<u>s/t</u>	Carios Vazquez	1031 Aqua Lane Fort Myers, FL 33919
Remove B. If amending or ad (attach additional s	ding additional s heets, if necessary	Page 2 of 4 Articles, enter change(s) here:). (Be spec(fic)	
	-		
	· · · · · · · · · · · · · · · · · · ·		

Note: If the date inserted in this block document's effective date on the Department Adoption of Amendment(s)	(no more than 90 days after amendment file date) es not meet the applicable statutory filing requirements, this date will not be ent of State's records. (CHECK ONE)	, if other than the
The amendment(s) wes/were adopted wes/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Hon a-

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 6, 2019

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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11 LED 2020 JAN -7 PM 2: 43 SECRETARY OF STATE TALLAHASSEE, FL