## N1900000699

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A. Butler

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

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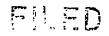
SOUTH PONTE NAME OF CORPORATION:	VEDRA BEACH OFFICIAL MARINE TURTLE PERMIT INC.
N19000000699	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
BILL HAVRE	
	(Name of Contact Person)
SOUTH PONTE VEDRA BEACH OFFICIAL M.	ARINE TURTLE PERMIT INC.
	(Firm/ Company)
7901 4TH ST N STE 300	
	(Address)
ST.PETERSBURG, FL 33702	
	(City/ State and Zip Code)
agent@floridaregisteredagebt.net	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
Bill Havre	850-87 4500 at
(Name of Contact Per	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu	
Mailing Address	Street Address

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



SOUTH PONTE VEDRA BEACH OFFICIAL MARINE TURTLE PERMIT INC.

(Name of Corporation as currently filed with the	Florida Dept. of State)	2021 AUG 30 AM 7: 44
N19000000699		NACES OF STATE
(Docum	ent Number of Corporation (if known)	TALLA PLACE, FL
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not For Profi</i>	t Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
NOT APPLICABLE		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		
B. Enter new principal office address, if applical	NOT APPLICABLE	
(Principal office address MUST BE A STREET A		<del></del>
C. E-ton Ilino addinos if anoticolds.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	NOT APPLICABLE	
	<del>-</del>	
		<del></del>
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or regis	tared office address in Florida, enter	the name of the
new registered agent and/or the new registere		the name of the
Name of New Registered Agent:	NOT APPLICABLE	
<u>Name of New Registered Agent.</u>		· ·=· = · · ·
	A.Y	cet uddress)
New Registered Office Address:	(Furrosa str	cei anacessy
	NOT APPLICABLE	Elonido
	(Citv)	, Florida (Zip Code)
		•
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		igations of the position.
, was the way of the same of t		-6 A may I may I may 1
<del></del>	Signature of New Registered Ag	gent, 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 <math>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	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add		NOT APPLICABLE		
Remove			<del> </del>	
2) Change Add	<del></del>	NOT APPLICABLE		
Remove 3) Change Add Remove		NOT APPLICABLE		
4) Change Add				
Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
AMMEND ARTICLE II	I TO REA	AD:		
SUPPORT THE SPVB C	FFICIAL	MTP IN MONITORING MT NESTING ACTIVITIE	S AS AUTHORIZED BY FWC.	
OR SUPPORT TOWARDS CONSERVATION, PROTECTION, EDUCATION AND CARE OF SEA TURTLES.				
ACT AS CHARITABLE	INÇ. W	THIN SECTION 501(C)(3) OF THE INTERNAL RE	VENUE CODE .	
ASSETS TO BE DISTRI	BUTED !	LIKEWISE 501(C)(3) UPON DISSOLUTION		

•		
		<del></del>
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· · · · · · · · · · · · · · · · · · ·		
The date of each amendment date this document was signed	t(s) adoption: 23 AUGUST 2021	_, if other than the
_	23 AUGUST 2021	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oppoval.	

	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 23 AUGUST 2021
	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)
	PATTY SMITH
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)