

N19 000 20000699

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(City/State/Zip/Phone #)

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2024 FEB -6 AM 9:45

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTH PONTE VEDRA BEACH OFFICIAL MARINE TURTLE PERM

DOCUMENT NUMBER: N19000000699

The enclosed *Articles of Amendment* and fee are submitted for filing

Please return all correspondence concerning this matter to the following:

BILL HAVRE

Name of Contact Person

SOUTH PONTE VEDRA BEACH OFFICIAL MARINE TURTLE PERMIT INC.

Firm/ Company

7901 4TH ST N STE 300

Address

ST.PETERSBURG, FL 33702

City/ State and Zip Code

agent@floridaregisteredagent.net

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Bill Havre

at (850-874-500)

Name of Contact Person

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

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

2024 FEB -6 AM 9:45

SOUTH PONTE VEDRA BEACH OFFICIAL MARINE TURTLE PERMIT INC.

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

N19000000699

(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:

NOT APPLICABLE

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:

NOT APPLICABLE

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

NOT APPLICABLE

(Mailing address MAY BE A POST OFFICE BOX)

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: NOT APPLICABLE

(Florida street address)

New Registered Office Address:

NOT APPLICABLE

(City)

Florida

(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

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>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>T</u>	<u>LORRI STEINMAN</u>	<u>7901 4TH ST STE 300</u> <u>ST PETERSBURG, FL</u> <u>33702</u>
<input checked="" type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	<u>DT</u>	<u>CHARLES SMITH</u>	<u>7901 4TH ST STE 300</u> <u>ST PETERSBURG, FL</u> <u>33702</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>JESSICA SMITH</u>	<u>7901 4TH ST STE 300</u> <u>ST PETERSBURG, FL</u> <u>33702</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
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			

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

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

NOT APPLICABLE

The date of each amendment(s) adoption: JANUARY 22, 2024, if other than the date this document was signed.

Effective date if applicable: JANUARY 22, 2024
(no more than 90 days after amendment file date)

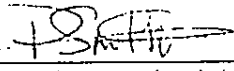
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

☒ 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 22, 2024

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)

< Back



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2024

BILL HAVRE
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702

SUBJECT: SOUTH PONTE VEDRA BEACH OFFICIAL MARINE TURTLE
PERMIT INC.
Ref. Number: N19000000699

We have received your document for SOUTH PONTE VEDRA BEACH
OFFICIAL MARINE TURTLE PERMIT INC. and your check(s) totaling \$35.00.
However, the enclosed document has not been filed and is being returned for the
following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA
NOT FOR PROFIT CORPORATION. Please complete and return the enclosed
blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 124A00003832

Handwritten signature and initials
KS
LS

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2024

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7901 4TH ST N
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