## N20169

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## **COVER LETTER**

TO: Amendment Section Division of Corporations SUNRISE CAY BOAT DOCK CONDOMINIUM ASSOCIATION, INC. NAME OF CORPORATION: \_\_ N20169 DOCUMENT NUMBER: \_\_\_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAVIER PEREZ (Name of Contact Person) MARQUIS ASSOCIATION MANAGEMENT (Firm/ Company) 31 OCEAN REEF DRIVE SUITE C 303 (Address) KEY LARGO, FL 33037 (City/ State and Zip Code) JAVIER.PEREZ@MARQUISHOA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JAVIER PEREZ 619-3706 305 (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) 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

SUNRISE CAY BOAT DOCK CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the	e Florida D	ept. of State)			
N20169					
(Docun	ent Numbe	r of Corporat	ion (if known)		
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation;	rida Statute:	s, this <i>Floride</i>	ı Not For Profi	t Corporation adopts the	following
A. If amending name, enter the new name of the	e corporati	on:			
N/A					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "inco	rporated" or th	e abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applica	ble:	N/A			
(Principal office address MUST BE A STREET A		-			
			··-·		
					_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE).	ROY)	N/A			
(Maning address part 1927) 17 (17 (17)	<u> </u>				
		<u> </u>		<del>-</del> -	-
				<del></del>	
D. If amending the registered agent and/or regis			Florida, enter	the name of the	
new registered agent and/or the new register	N/A	iaress:			F-3
Name of New Registered Agent:					····
New Registered Office Address:			(Florida str	eet address)	<del></del>
<u>New Registerea Office Address</u> .					1
		(City)		, Florida (Zip Code)	
					C
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered . 1 Lam fan	Agent: viliar with and	l accept the obi	ligations of the position.	
_	Sig	gnature of New	w Registered Ay	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 = Trustec; 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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	j,	RONALD ELENBAAS	
× Remove			
2) × Change Add	<u>P</u>	KENNETH KARL	31 OCEAN REEF DR SUITE C303 KEY LARGO, FL 33037
Remove 3 ) Remove Add x Remove	<u>S/T</u>	KENNETII KARL	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		Articles, enter change(s) here: c). (Be specific)	
N/A			

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The date of each amendment(date this document was signed.	s) adoption:				if other than the
Effective date if applicable:	MARCH 4 2021				
		m 90 days after at			
<u>Note:</u> If the date inserted in thi document's effective date on th	s block does not meet the Department of State's	ne applicable statu records.	itory filing requir	rements, this date wil	I not be listed as the

(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.

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Signature  (By the chairman of 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)
KENNETH KARL
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)