N2100000 3407

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE PROPER AT SOUNDVIEW BOARDWALK ASSOCIATION, INC.		
DOCUMENT NUMBER: N21000003407		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Dax A. Campbell		
(Name of Contact Person)		
THE PROPER AT SOUNDVIEW BOARDWALK ASSOCIATION, INC.		
(Firm' Company)		
232 Sabine Drive		
(Address)		
Pensacola Beach, FL 32561		
(City/ State and Zip Code)		
dax.campbellconstruction@gmail.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Raymond Palmer at 850 712-3223		
(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:		
S35 Filing Fee		

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

THE PROPER AT SOUNDVIEW BOARDWALK ASSOC	TATION, INC.		
Name of Corporation as currently filed with the Florida	Dept. of State)	2021 HAY -6	PM 4: 08
N21000003407			
(Document Num	ber of Corporation	TALLAHA	GSEE, FL
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida N</i>	sot For Profit Corporati	on adopts the following
A. If amending name, enter the new name of the corpora	tion:		
PROPER AT SOUNDVIEW BOARDWALK ASSOCIATION	ON, INC.		The new
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	ation" or "incorp	orated" or the abbrevia	tion "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</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 off new registered agent and/or the new registered office		orida, enter the name o	<u>f the</u>
Name of New Registered Agent.			
New Registered Office Address:		(Florida street address)	
		, Flo	orida
	(City)	(Zıp Code)
New Registered Agent's Signature, if changing Registered	l Agent		
Thereby accept the appointment as registered agent. I am fo	uniliar with and a	ecept the obligations of	the position.
		• •	
	ignature of New 1	Registered Agent, if char	

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	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Do Mike Jo Sally Si	ones	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change Add		_		
Remove				
2) Change Add		-		
Remove 3) Remove — Add		-		
Remove 4) Change Add		_		
Remove		-		
Add				
6) Change Add		_		
Remove			_	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
				3-11-11-11-11-11-11-11-11-11-11-11-11-11

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days a	fier amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	
= -F	

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The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

DAX A. CAMPBELL

(Typed or printed name of person signing)

PRESIDENT

DocuSign Envelope ID: 69CF2897-7FAD-47B0-9349-2FF12E090CF7

(Title of person signing)