Division of Corporations Electronic Filing Cover Sheet

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(((H22000403348 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : WHITEBIRD Account Number : I20200000041 : (321)327-5580

Fax Number

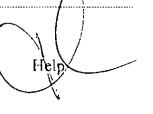
: (321)327-5655

\*\*Enter the email address for this business entity to be used for future annual report moflings. Enter only one email address please. \*\*

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE VUE AT SATELLITE BEACH HOMEOWNERS ASSOCIATION, I

Certificate of Status Certified Copy Page Count Estimated Charge \$35.00

Electronic Filing Menu Corporate Filing Menu



MH 9: 23



December 2, 2022

## FLORIDA DEPARTMENT OF STATE

THE VUE AT SATELLITE BEACH HOMEOWNERS ASSOCIATION, INC. 5055 BABCOCK ST., N.E., SUITE 4 PALM BAY, FL 32905

SUBJECT: THE VUE AT SATELLITE BEACH HOMEOWNERS ASSOCIATION, INC.

REF: N22000005001

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

Claretha Golden Regulatory Specialist II

FAX Aud. #: H22000403348 Letter Number: 622A00026622

## **COVER LETTER**

TO: Amendment Section
Division of Corporation

NAME OF CORPORATIO		Beach Homeowners A			
	V22000005001				
DOCUMENT NUMBER:					
The enclosed Articles of Ame	endment and fee are subn	nitted for filing.			
Please return all corresponde	nce concerning this matte	er to the following:			
Bradley F. White, Esq.					
W		(Name of Contact Per	son)		
WhiteHird, PLLC					20
,		(Firm/ Company)			2072 [
					DEC
2101 Waverly Place, Suite 1					1
		(Address)		······································	
		,			P
Melbourne, Florida 32901				•	Ý
		(City/ State and Zip C	Code)		۳ ک
					_
bwhite@whitebirdlaw.com					
	-mail address: (to be used	for future annual rep	ort notification	)	
For further information conc	erning this matter, please	: call:			
Bradley F. White, Esq.		at		327-5580	
<u></u>	(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number	)
Enclosed is a check for the f	ollowing amount made p	ayable to the Fiorida I	Department of	State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certifi Certifi	Piling Fee cate of Status led Copy tional Copy is used)	
Mailing 2	Address	Str	eet Address		
Amendment Section		Amendment Section			
Division of Corrections		Division of Comparations			

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 \$10
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Name of Corporation as currently filed with the Florida D	ept. of State)	
N22000005001		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation		Corporation adopts the following
***************************************	<del></del>	277
name must he distinguishable and contain the word "corporate	ion" or "incorporated" or the	The new abbreviation "Corp " or "Inc."
"Company" or "Co." may not be used in the name.	v. w. moo.p.o.m. w	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	928 E. New Haven Avenue	)22 [
	Melbourne, Florida 32901	2022 DEC
		2
		7
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	928 E. New Haven Avenue	**
(muting dutiess MAT OF A LOST OF FIGH DOW)	Melbourne, Florida 32901	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		the name of the
Name of New Registered Agent:		
	(Fiorida str	cet widewsji
New Registered Office Address:		
######################################		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa-		ligations of the position.
	gnature of New Registered A	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 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	V Mike	Dec Flones Smith	
Type of Action (Check One)	Title	Name	Address
i)Change Add	<u>D</u>	Don Facciobene	5055 Babcock Street, N.E., Suite 4D Palin Bay, Florida 32905
A Remove  2) Change Add	DPT	Adam Facciobene	5055 Habcock Street, N.E.; Suite 4— Melbourne, Florida 32905
Remove Change Add Remove	<u>D</u>	Jimmy Winemiller	6140 Dovecote Lane  Memphis, Tennessee 38102
4) Change Add	<u>D</u>	Kevin Marts	928 E. New Haven Avenue Melbourne, Florida 32901
Remove  5) Change Add  Remove	,		
6) Change Add Remove			
		Articles, enter change(s) here: y). (Be specific)	
·			

<u>Note:</u> 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.

(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)

Bradley F. White, Esq.

(Typed or printed name of person signing)

Authorized Representative

(Title of person signing)

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