MARY

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15 JAN 20 AN ID: 28

JAN 23 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: La Sal Suites	s Condomin	um Association, Inc.			
DOCUMENT NUMBER: N22474					
The enclosed Articles of Amendment and fee are submitted	ted for filing.				
Please return all correspondence concerning this matter to	o the following:				
Niurka Fernandez Asmer,	Esq.				
	lame of Contact Person	n)			
Fernandez Florida Law, P	'A				
	(Firm/ Company)				
113 S. Boulevard, 1st Floo	or				
	(Address)				
Tampa, FL 33606					
(City/ State and Zip Code)					
nicki@fernandezfloridalaw.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please cal					
Niurka Asmer	a(813	<u>,</u> 412-5605			
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)			
Enclosed is a check for the following amount made payab	ble to the Florida Depa	artment of State:			
(\$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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of

可拉图D 15 JAN 20 AE 10: 28

	(Nam	<u>e of Corpo</u> i	ation as c	urrently	filed with	the Flor	ida Dept	. of State
La	Sal	Suites	Condo	ominiu	m Ass	sociati	ion, Ir	TC.



(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:

Clearwater Beach Suites			Ine ne
"Company" or "Co." may not be used in		uon or incorporatea or ti	ne aobreviation Corp. or 1nc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		530 Mandalay A	ve.
		Clearwater, FL 3	33767
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		1623 Windsor Pl	lace
		Clearwater, FL 33755	
D. If amending the registered agent and			the name of the
new registered agent and/or the new		iddress: nandez Asmer, Es	a
Name of New Registered Agent:	113 S. Boulevard, 1st Floor		<u>4·</u>
	113 3. Dou	(Florida street address)	
New Registered Office Address:			
	Tampa,		Florida 33606
	(City)	11	(Zip Code)
New Registered Agent's Signature, if cha			
l hereby accept the appointment as register			ligations of the position.
	Signature of New	Registered Agent, if changing	3
		Page 1 of 4	

Page 1 of 4

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>V</u> <u>Mil</u>	n Doc te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove Change			
Add			
3) Change Add Remove			
4) Change Add			
Remove 5) Change	***************************************		
Add Remove			
6) Change Add Remove	***************************************	·	
Keniove			

See Attached Amendments to be Recorded with Pinellos county CIERX OF COURT
Recorded with Pinello's county clepk of court
CLERK OF COURT /

The da	ite of each amendment(s) adoption: NOVEITIDET 13, 2014 is document was signed.	, if other than the		
Effecti	Effective date if applicable:			
	(no more than 90 days after amendment file date)			
Adopti	ion of Amendment(s) (CHECK ONE)			
	the amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) as/were sufficient for approval.			
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.			
	Dated January 13,2015			
	Signature Medical .			
	(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)			
	Michael Higdon			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			