N24953

. (Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	bor Townho	me Assoc	. of okaloosa County, Inc.
DOCUMENT NUMBER: N24953			
The enclosed Articles of Amendment and fee a	re submitted for f	iling.	
Please return all correspondence concerning thi	s matter to the fol	lowing:	
Peter A. Mohylsky			
	(Name of	Contact Persor	n)
Snug Harbor HOA			
	(Firm	(Company)	
PO Box 1043,			
	(A	(ddress)	
Shalimar, Fl 32579			
	(City/ Stat	e and Zip Cod	e)
PAMoh@live.c	com		
E-mail address: (to b	be used for future	annual report	notification)
For further information concerning this matter,	please call:		
Peter Mohylsky	a	850	517-7098
(Name of Contact Person)		V	ode & Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to th	e Florida Depa	artment of State:
\$35 Filing Fee \$25 Stiling Fee Certificate of S	Status Certifie	d Copy onal copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



October 18, 2012

PETER A. MOHYLSKY P.O. BOX 1043 SHALIMAR, FL 32579

SUBJECT: SNUG HARBOR TOWNHOME ASSOCIATION OF OKALOOSA

COUNTY, INC.

Ref. Number: N24953

We have received your document for SNUG HARBOR TOWNHOME ASSOCIATION OF OKALOOSA COUNTY, 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Letter Number: 412A00025743

Carol Mustain Regulatory Specialist II

www.sunbiz.org



December 17, 2012 -

PETER A. MOHYLSKY P.O. BOX 1043 SHALIMAR, FL 32579

SUBJECT: SNUG HARBOR TOWNHOME ASSOCIATION OF OKALOOSA

COUNTY, INC.

Ref. Number: N24953

We have received your document for SNUG HARBOR TOWNHOME ASSOCIATION OF OKALOOSA COUNTY, 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):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 412A00025743

Articles of Amendment to Articles of Incorporation

of

Snug Harbor Townhome	Association of Okaloosa County Inc.
(Name of Corporation as currently filed with the Flori	da Dept. of State)
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	n: The new
name must be distinguishable and contain the word "corporatio" "Company" or "Co." may not be used in the name.	······································
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	207 Sny Harbor Br
C. Enter new mailing address, if applicable:	Shalimar, 1-1 305)
(Mailing address MAY BE A POST OFFICE BOX)	
_	<i>S</i>
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office add	
Name of New Registered Agent: Peter Mohyls	sky Signatura
208 Snug Ha	arbor Dr 🗼 🛣 🗲
	lorida street address)
New Registered Office Address: Shalimar	_{55. 11} 32579
(City)	Florida SZ37 9 (Zip Code)
	1
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. Tan Yam Signature of New Register	lian with and accept the obligations of the position.
Pa	ge 1 of 4
RaCM	Sny Norber
President.	Snightabur

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>Mik</u>	n <u>Doe</u> te <u>Jones</u> ty <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add X Remove	S/T	Terre Dominique	234 Snug Harbor DR Shalimar, Fl 32579
2) Change	S/T	Peter A. Mohylsky	208 Snug Harbor Dr Shalimar, Fl 32579
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

WA .	. If amending or adding additional Ar (attach additional sheets, if necessary).	(Be specific)	<u></u>	
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The date of each amendment(s) adoption, MA (7) get Del 2
Effective date if applicable: 17 Spt 2013
(no more than 90 days after amendment file date)
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 Tan du 3
Signature Votes Ce Morron
(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)
Ray C. Marson
(Typed or printed name of person signing)
(Title of person signing)