N24963

. (Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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JAN 05 2012

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations Luina Shores Candinumum Disarchim DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHOLDS LEORRINI (Name of Contact Person) Oquina Shore Condonimum Description (Firm/ Company) Belbeir Beach, Fz 33786 MPOSINIO MINARECORP. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2011

NICHOLAS J. PORRINI COQUINA SHORES CONDOMINIUM ASSOCIATION 2800 GULF BLVD #2D BELAIR BEACH, FL 33786

SUBJECT: COQUINA SHORES CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N24963

We have received your document for COQUINA SHORES CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Where are the 2 pages you failed to submit with your application? We have to have page 3 of 4 and 4 of 4, please locate and send the complete application.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 711A00028481

HOME WITH A HOST OF LITE TOKEN WHILE I SHAWL IT

Articles of Amendment

to
Articles of Incorporation

of A 1
('oguino Shores Condoniniam) ssocition, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Letter new mailing address MAY BE A POST OFFICE BOX Letter new mailing address MAY BE A POST OFFICE BOX Letter new mailing address, if applicable: Letter new mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: NICLISCAS. LERINI
New Registered Office Address: Lilear Leach (City) New Registered Office Address: (Florida street address) (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familial with and accept the obligations of the position. Signature of New Registered Agent, if changing
Page 1 of 4

12 JAN -5 PH 3: 50
TALLAHASSEE, FLOATE

1 . . .

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please Indicate the title(s), name and address for each officer/directors, please list them on an additional sheet.)

Title(s)

Name

Address

1) FLES/MENT

NICHALA SOLEHINI

2852 Gulf BW3

Ona NEDSUREL

2) Secertary

Ellen Murphy

50 AWE H

Mon roe Town ship, NJ

0883!

4)

6)

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

Title(s)

Name

Title(s)

Name

.....

. If amending or adding addi (attach additional sheets, if no	itional Articles, enter change ecessary). (Be specific)	<u>ge(s) here</u> :	
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The date of each amendment(s) adoption:					
Effective date if a	plicable:				
	(no more than 90 days after amendment file date)				
Adoption of Amen	dment(s) (<u>CHECK ONE</u>)				
	nt(s) was/were adopted by the members and the number of votes cast for the amendment(s) cient for approval.				
	tembers or members entitled to vote on the amendment(s). The amendment(s) was/were board of directors.				
Dates	12/28/2011 . 1				
Signa					
	(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)				
	NICHOLAS J. PORRINI				
_	(Typed or printed name of person signing)				
_	JRESIDENT				
	(Title of person signing)				