## N26733

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2021 MAR 12 AM 7: 41 SECRETARY OF STAT

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Overlook Docks Ass	ociation, Inc.		
N261 DOCUMENT NUMBER:	733			
The enclosed Articles of Amendo	nent and fee are sub	mitted for filing.		
Please return all correspondence	concerning this matte	er to the following:		
Claire Calandra				
		(Name of Contact Po	erson)	
Overlook Docks Association, Inc	) <u>-</u>			
		(Firm/ Company	y)	
1167 Hillsboro Mile				
		(Address)	· , <u>.</u>	
Hillsboro Beach/FL/33062				
		(City/ State and Zip	Code)	
overlookcondo@aol.com				
E-mai	address: (to be used	for future annual re	port notification	1)
For further information concerning	ng this matter, please	call:		
Claire Calandra		at	973	868-868-3687
(Nan	ne of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	ving amount made pa	yable to the Florida	Department of	State:
■ \$35 Filing Fec □\$	43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy cional Copy is sed)
<u>Mailing Addre</u> Amendment Se			reet Address nendment Secti	on

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** to Articles of Incorporation of

Overlook Dock Association, Inc.

FILED

(Name of Corporation as currently filed with the Florida	Dept. of State)	2021 MAR 12	AM 7-1.1.
N26733			
(Document Nur	nber of Corporation (if	Known) ECRETARY TALLAHAS	OF STATE SEE, FI
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this Florida Not	For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpor	ation:		
		<u> </u>	The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpora	ted" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u> )		
	<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Manning address Marky DE M. 1 Ob 1 O 1 1 Less Doils)			
	<del></del>		-
			<u></u>
D. If amending the registered agent and/or registered o		ia, enter the name of th	<u>1e</u>
new registered agent and/or the new registered office	address:		
Name of New Registered Agent:	·		
New Registered Office Address:		(Florida street address)	
		Filada	t
<del></del>	(City)	, Florid (Zip	Code)
New Registered Agent's Signature, if changing Register	ed Agent:		
I hereby accept the appointment as registered agent. I am	familiar with and acce	pt the obligations of the	position.
<del> </del>	Signature of New Reg	istered Agent, if changir	g Bg

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	PT         John De           V         Mike Jo           SV         Sally Si	one <u>s</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	Р	Scott Goss	Hillsboro Beach, FL 33062
<ul> <li>X Remove</li> <li>2) X Change Add</li> </ul>	<u>P</u>	Claire Calandra	1167 Hillsboro Mile #416 Hillsboro Beach, FL 33062
X Remove 3) Change Add Remove	<u>T</u>	Cynthia Hiland	1167 Hillsboro Mile #106 Hillsboro Beach, FL 33062
4) Change	<u>S</u>	Thomas Calandra	1167 Hillsboro Mile #416 Hillsboro Beach, FL 33062
Remove  5) Change	<u>T</u>	Terri Balsamo	1167 Hillsboro Mile #303 Hillsboro Beach, FL 33062
Remove  6) Change  × Add	VP	Daniel Balsamo	1167 Hillsboro Mile #303 Hillsboro Beach, FL 33062
E. If amending or adding (attach additional sheet)		icles, enter change(s) here: (Be specific)	

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			<del></del>	<del></del>
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The date of each amendment(s) a date this document was signed.	March 1, 2021			, if other than the
Effective date if applicable:	rch 1, 2021			
	(no more than 90 days	s after amendment file do	ite)	
Note: If the date inserted in this bedocument's effective date on the D	ock does not meet the applicate epartment of State's records.	able statutory filing requi	rements, this date will no	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
The amendment(s) was/were was/were sufficient for appro	adopted by the members and (val.	the number of votes cast	for the amendment(s)	

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 $\frac{3/5/21}{8}$			
(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)			
DANIEL BALSAMO			
(Typed or printed name of person signing)			
Vice Pres.			
(Title of person signing)			

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