N33580

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MAR 2 6 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

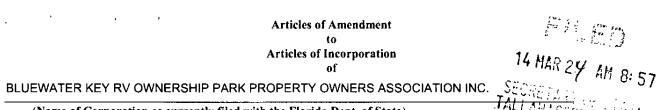
P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations BLUEWATER KEY RV OWNERSHIP PARK PROPERTY OWNERS ASSOCIATION INC. NAME OF CORPORATION: N33580 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VICTORIA HOLDER (Name of Contact Person) **BLUEWATER KEY** (Firm/ Company) 2950 US HWY 1 (Address) KEY WEST FL 33040 (City/ State and Zip Code) BLUEKEYRV@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DONNA EISENTRAUT (Name of Contact Person) 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



(Name of Corporation as currently file	d with the Flori	da Dept. of State)	Ţ,	ALLAHASSEE	
N33580					or Foldi
(Document	Number of Corp	ooration (if known)			
ursuant to the provisions of section 617.1006, mendment(s) to its Articles of Incorporation:	Florida Statutes,	this <i>Florida Not Fo</i>	r Profit Corporatio	on adopts the fo	llowing
. If amending name, enter the new name of	f the corporation	<u>1:</u>			
				T	he new
name must be distinguishable and contain the w "Company" or "Co." may not he used in the n		n" or "incorporated	l" or the abbreviat	ion "Corp." or	"Inc."
3. <u>Enter new principal office address, if app</u> Principal office address <u>MUST BE A STREE</u>				<u> </u>	
	-				
	_				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE					
(multing address MAT DLATOST OF IT	<u> </u>				
	_				
	-				
 If amending the registered agent and/or r new registered agent and/or the new registered. 			enter the name of	<u>f the</u>	
Name of New Registered Agent:					
New Registered Office Address:	(F	lorida street address)			
			, Florida		
	(City)			(Zip Code)	
iew Registered Agent's Signature, if changir	ng Registered A	gent:			
hereby accept the appointment as registered a	igent. I am fami	liar with and accept	the obligations of	the position.	
			<u>.</u>		
Sim	nature of New R	paietared Agant if al	zanaina		

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 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 Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	<u>s</u>	CARL SCHWOBEL	2950 US HWY 1
Add			KEY WEST FL 33040
Remove			
2) X Change	<u>T</u>	DEBBY PALMER	2950 US HWY 1
Add			KEY WEST FL 33040
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional sheets, if necessary).	(Be specific)

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	date of each amendment(s) adoption: FEBRUARY 24, 2014	, if other than the		
date this document was signed. Effective date if applicable: FEBRUARY 24, 2014				
	(no more than 90 days after amendment file date)			
Ado	option 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 2/24/14			
	Signature Vieta a L Halde			
	(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)			
	VICTORIA L HOLDER			
	(Typed or printed name of person signing) PRESIDENT			
	(Title of person signing)			

14 MAR 2# AH 8: 57
SECRETARING SAIR
TAIL AHASSES DISTRICT