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COVER LETTER

TO: Amendment Section . **Division of Corporations**

NAME OF CORPORATION:	of Bayshore Condominium Association Inc
N96000002705 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Cristine Correia	
	(Name of Contact Person)
Rent Ready Leasing and Management Inc	
	(Firm/ Company)
1938 SW Biltmore St	
	(Address)
Port St Lucie Fl 34984	(City/ State and Zip Code)
	(City/ State and Zip Code)
cristinecorreia@bellsouth.net	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Cristine Correia	772 8797000 at
(Name of Contact Per	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	وين في وري
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Tropical Shoppes of Bayshore Condominium Association Inc

(Name of Corporation as curren	itly filed with the Florida Dept	. of State)
N96000002705		
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006. Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit C</i>	Corporation adopts the following
A. If amending name, enter the new name of the corporat	tion:	
	DIA	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	19 MA
D. If amending the registered agent and/or registered offi		ξτ. φ
new registered agent and/or the new registered office a	address:	'3-
Name of New Registered Agent:	P/A	
New Registered Office Address:	(Florida street	t address)
		Clarida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		rations of the position.
	Signature of New Registered Age	nt. if chanving

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	Gary Zanello	1938 SW Biltmore St
Add			Port St Lucie Fl 34984
x Remove			-
2) Change	<u>v</u>	John Jarvis	1938 SW Biltmore St
X Add			Port St Lucie Fl 34984
Remove			
3) Change			
Add			 -
Remove			-
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change		 	
Add			
Remove		0 2 4	

		(Be specific)				
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The date of each amendment(s) a	doption: 4-19-19	if other than the
date this document was signed.	•	
Effective date if applicable:	4-19-19	·
	(no more than 90 days after amena	dment file date)
Note: If the date inserted in this bl document's effective date on the D		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of ral.	votes cast for the amendment(s)
There are no members or men adopted by the board of direc	abers entitled to vote on the amendment(s), tors.	. The amendment(s) was/were
Dated	4.29.19	
(By the cha have not be	irman or vice chairman of the board, presiden selected, by an incorporator – if in the lappointed fiduciary by that fiduciary)	
F	FRANK LOW bard (Typed or printed name of	DZZ (Sperson signing)
	PRESIDENT (Title of person	n signing)