

N970000003797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

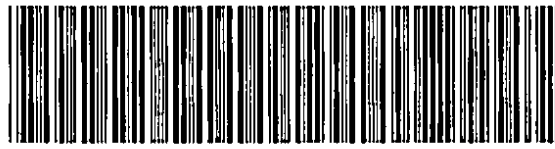
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 JAN - 3 AM 10: 22
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Albritton

JAN - 4 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VIP ISLAND PARKING ASSOCIATION, INC

DOCUMENT NUMBER: N97000003797

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SAMUEL TIPPMANN
(Name of Contact Person)

(Firm/ Company)

1901 HARBOR CITY BLVD, SUITE 508
(Address)

MELBOURNE, FL 32901
(City/ State and Zip Code)

STIPPMANN@TICOLD.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TRACEY MCCARTHY at 321 557-9049
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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 Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2017

SAMUEL TIPPMANN
1901 HARBOR CITY BLVD
STE. 508
MELBOURNE, FL 32901

SUBJECT: VIP ISLAND PARKING ASSOCIATION, INC.
Ref. Number: N97000003797

We have received your document for VIP ISLAND PARKING ASSOCIATION, 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):

The first page is for a Profit corporation.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 217A00025751

RECEIVED
18 JAN -3 PM 1:58
DIVISION OF CORPORATIONS
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED
2019 JAN -3 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIP ISLAND PARKING ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N97000003797

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* 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)

1901 HARBOR CITY BLVD.
SUITE 508
MELBOURNE, FL 32901

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1901 HARBOR CITY BLVD.
SUITE 508
MELBOURNE, FL 32901

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: _____
1901 HARBOR CITY BLVD., SUITE 508
(Florida street address)

New Registered Office Address: _____
MELBOURNE, Florida 32901
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>DAVIDSON, WILLIAM</u>	<u>847 GOLFVIEW TERRACE</u> <u>WINTER PARK, FL 32789</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>TIPPMANN, SAMUEL</u>	<u>5325 US HWY. 1</u> <u>GRANT, FL 32949</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>BEAULIEU, JOHN</u>	<u>24 LEONARDO DRIVE</u> <u>STONE RIDGE, NY 12484</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>HOWARD, PAUL</u>	<u>1015 SAINT NICHOLAS AVE.</u> <u>CHRISTMAS, FL 32709</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>KOMMATAS, PETER</u>	<u>419 SE 7TH STREET</u> <u>DANIA, FL 33004-4405</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>ABLE, RONNY</u>	<u>142 ABLE MOUNTAIN LANE</u> <u>WEST POINT, KY 40711</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ADD D MEL, RON 2184 ROCKLEDGE DRIVE
ROCKLEDGE, FL 32955

December 11, 2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

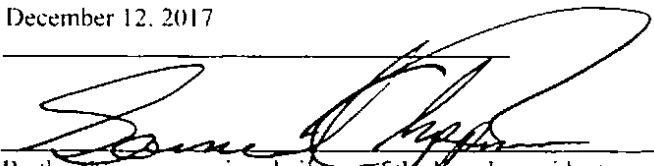
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 December 12, 2017

Signature 

(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)

Samuel Tippmann

(Typed or printed name of person signing)

President

(Title of person signing)