Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000377073)))



H220000377073ABC

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : NAJMY THOMPSON, P.L.

Account Number : I20090000014 Phone : (941)907-3999

Fax Number : (941)840-5559

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

PM 2: 44

nail Address: <u>matt.goff@prime vacations</u>

COR AMND/RESTATE/CORRECT OR O/D RESIGN ANNA MARIA ISLAND ACCOMMODATIONS, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ANNA MARIA IS	LAND ACCOMMODATION	ONS, INC.
DOCUMENT NUM			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Sean Kelly		
		Name of Contact Person	l .
	Najmy Thompson, P.L.		
		Firm/ Company	
	1401 8th Ave		
		Address	
	Bradenton FL 34205		
		City/ State and Zip Code	
	Skelly@najmythompson.com	ı	
	E-mail address: (to be us	ed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Sean Kelly		at (<u>941</u>	7482216
Nam	e of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment 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

Street Address
Amendment Section
Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

of	•
ANNA MARIA ISLAND ACCOMMODATIONS, INC.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P01000001089	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". I chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	9801 Gulf Dr Suite 5, Anna Maria, FL 34216
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 919, Anna Maria, FL 34216
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(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)

Example:

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.

X Change	<u>P1</u>	John Do	<u>·c</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nịth</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1)Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

made additional shoots, if need said yy.	(Be specific)	
		_
		_
		_
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	endment it not contained in the amendment user;	
		_
		_

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 da	vs after amendment file date)
Note: If the date inserted in this blo- document's effective date on the Depa		statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		nber of votes cast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea		voting groups. The following statement separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were su	fficient for approval
by		
	(voting group)	
sclequed,		if directors or officers have not been ds of a receiver, trustee, or other court
_	(Typed or printed name	Kaleta
	(Typed or printed name	of person signing)
_	Direc	V /
	(Title of person signing)