P0400089497

		,
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
`	,	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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00)	isiness chury ivai	ne,
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
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2017 NOV 15 FX 3:48

C. GOLDEN NOV 1 6 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: Bayshore Villas Pr	operties Inc.		
	1BER: P04000089497		<u></u>	
The enclosed Article	es of Amendment and fee are su	bmitted for filir	ıg.	
Please return all cor	respondence concerning this ma	tter to the follow	ving:	
	Baker Clark			
		Name of Co	ntact Persor	1
	Bayshore Villas Properties In	ıc.		
		Firm/ C	ompany	
	974 Grand Canal St.			
		Ado	lress	
	Gulf Breeze, FL. 32563			
		City/ State a	nd Zip Code	:
bak	er@navarrebestwestern.com			
	E-mail address: (to be us	sed for future ar	inual report	notification)
	`		•	,
For further informat	ion concerning this matter, pleas	se call:		
Baker Clark		at (850	450-8073
Nam	e of Contact Person			de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the F	lorida Depa	rtment of State:
■ \$35 Filing Fce	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fill Certified C (Additional enclosed)	ору	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 allahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FMIJ

2017 NOV 15 PR 3: 48

	01	2017 NOV 15	PR 3: 4
BAYSHORE VILL	A'S PROPERTIES, INC.		
(Name of Corporation as curre	ntly filed with the Florida De	pt. of State)	l,
P040000	089497	-71	
(Document Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation	adopts the following amen	dment(s) to
A. If amending name, enter the new name of the corporation:			
NA		The	new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," oword "chartered," "professional association," or the abbreviatio	r "Co". A professional corpo	porated" or the abbrevio oration name must contain	ition (the
B. Enter new principal office address, if applicable:	8697 Navarre Parkway		
(Principal office address MUST BE A STREET ADDRESS)	Navarre, FL. 32566		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			_
			
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr		ame of the	
Name of New Registered Agent			
(Florida	street address)	·-	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Age			
I hereby accept the appointment as registered agent. I am familio	ar with and accept the obligation	ons of the position.	
Signature of Nev	w Registered Agent, if changing	3	

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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>Y</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
i) Change	D	_	Karen Cook	731 Pensacola Beach Blvd.
Add				Pensacola Beach, FL.
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove	i			
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
NA

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 shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
11/09/2017 Dated
- Bale Plant
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Baker Clark
(Typed or printed name of person signing)
DP
(Title of person signing)

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