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C KNUZEA GEL, S. A. SAID

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: OCEAN C	EOVE E.V	SALE	3 INC. OF	ST. AUGUSTIAE
DOCUMENT NUMBER	:PO5000153	3979			
The enclosed Articles of A	mendment and fee are su	bmitted for filing			
Please return all correspon	dence concerning this ma	tter to the followi	ng:		
	SETH D.	CORNEAL Name of Con	tact Persor	1	
	THE CORNI	EAL LAW	Fie	<u>n</u>	
		Firm/ Co	mpany		
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	_	Addre		20.44	
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		City/ State and	a z.ip Cou		
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	L-man address. (to be de	sed for future aim	uar report	notification)	
For further information co	nceming this matter, pleas	se call:			
C	604 154		004	. 810 -	122
Name of Co	CORMEAL ontact Person	at (	Area Co	de & Daytime Tele	phone Number
Enclosed is a check for the				-	•
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filin Certified Co (Additional c enclosed)	ру	S52.50 Filing Certificate of 3 Certified Copy (Additional Co is enclosed)	Status y
Amendn Division P.O. Bo:	Address nent Section of Corporations x 6327 see, FL 32314		Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Ci assee, FL 32301	ircle

## Articles of Amendment to Articles of Incorporation of

OCEAN GROVE R.V. SALE	filed with the Florida Dept. of State)
	med with the Florida Dept. of State)
	2 (01
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	<i>Torida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation,	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	4225 A/A south
	St. Aubustene, FI. Bloso
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4225 A1A SOUTH
	ST. AUGUSTINE, FL 32030
New Registered Office Address: ST AUGUSTO	RUTHENHAUSKL HANDER DR. St. Ademson, The state of address)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w  Signature of New Re	rgistered Agent, if changing
	$\dot{arphi}$ , $\dot{arphi}$

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name Address	
1) X Change	P.D. ROBERT P. RUTHERLES 380 Phredley HA	Beadl,
Add	Si Auburne, F.	
Remove		
2) 🔀 Change	UP Joey Schneider 240 Brantley Harb	n dr.
Add	St. Augustine, FC.	
Remove	T Brian Schneider 264 Brantley 1	10-11-1
3) X Change Add	ST. AUGUSTIZE PLB2086	7.000 0.
Remove		
4) Change	S SENDERLING KARL 6775 US 1 SOUTH	
Add	ST. AUGUSTINE FL	
X Remove	32086	
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	<del>_</del>		
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				<u> </u>
				-
<u> </u>				
f an amendment provides for an excl	nange reclassification	n, or cancellation o	f issued shares	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contai	ined in the amendm	ent itself:	
-				<u> </u>
<del>-</del>	<u> </u>			
			<u>.                                    </u>	···

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	avs after amendment file date)
(no more than 90 d	ays after amenament fite date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	le statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The nuby the shareholders was/were sufficient for approval.	imber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	
"The number of votes cast for the amendment(s) was/were so	ufficient for approval
by(voting group)	"
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors win action was not required.	thout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated	
(By a director, president or other officer	
selected, by an incorporator – if in the has appointed fiduciary by that fiduciary)	ands of a receiver, trustee, or other court
	ROTAENAUSIA
(Typed or printed nan	ne of person signing)
(Title of p	person signing)