P12000047535

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(⊅∞	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	_

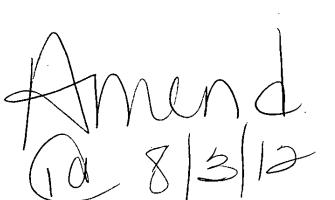
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Oceans ide Beach Rentals, Inc.
DOCUMENT NUMBER: P 120000 47535
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Oclanside Beach Rentals Inc. Firm/ Company 12 Prighting Lane Address New and GA 30265 City/ State and Zip Code Limizar a amail com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tim Uzar a1 (678) 673-1822
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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment

to

	Articles of Incorporation of	n	
Octor Sic	Beach R	pentals, Inc	_ _
P 121	DOOO 47535 Sumber of Corporation (if known)	2	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new name	of the corporation:		
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "Co". A pr		
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)			_ _
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF			- ************************************
D. If amending the registered agent and/onew registered agent and/or the new resistered agent and/or the new resistered Agent		rida, enter the name of the	- H 8: +3
_	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	_
New Registered Agent's Signature, if chan I hereby accept the appointment as registere	ging Registered Agent: d agent. I am familiar with and ac	cept 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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	P Patricia Movelli	613 Eastern Laine Rd
Add Remove		Unit 2 Seagrave Beach Fl. 32459
2) Change Add	P Robert Tim Uzar	613 Easteen Lake Road
Remove 3) Change Add	D Robert Calistri	Slagroul Plach F132450 24000 State Rd 60E #592
Remove 4) Change Add		Valnico, pl 33595
Remove	·	
5) Change Add	<u> </u>	
Remove		
6) Change Add		
Adu		

ruatil	additional s	ding addition heets, if neces	isary). (Be	specific)	·		

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lf an a	mandmant i	anavidas fan s	n avahanga	rodoscifizati	on or concelle	ition of issued s	hanos
<u>provi</u>	sions for im	plementing th	<u>ie amendmei</u>	nt if not conta	ined in the an	nendment itself	inares.
(į	f not applica	ıble, indicate l	V/A)				
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The date of each amendment(s) adoption: 724/2012
Effective date if applicable: 7 24 7012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
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.
Dated 7 2412012
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)
Patricia Morelli
(Typed or printed name of person signing)
President
(Title of person signing)