P15000034151

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SECRETARY OF STATE
TALLATISSEE FLORIDA

JUN 1 1 2015 T CANNON

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	TION: DARE C	OASTAL PR	POPERTY MANAGEMENT I	N
DOCUMENT NUMBE	n	034151		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
_		Name of Contact Person		
OAL	RECOASTAL F	PROPERTY MF	NAGEMENT INC	
	1904 Pl	2ADO ST		
***	7 5 - 1 7 -	Address		
	NAVA	RRE FL	32666	
<u> </u>		City/ State and Zip Co	de	
	IAUAIRE B E-mail address: (to be us	ACOMAL sed for future annual repo	com notification)	
For further information of	concerning this matter, pleas	se call:		
DAWN GR Name of	Contact Person	at (<u>850</u> Area C	Ode & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida De	partment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailir	ng Address	Stree	t Address	

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

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

Articles of Amendment

to

Articles of Incorporation

of		
Dare Chastal Prop	erty Management	$\sqrt{\chi}$
Name of Corporation as currently fi		
P150000 24151		
(Document Number of Co	orporation (if known)	
·	•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendm	ent(s) to
·		
A. If amending name, enter the new name of the corporation:		
	The nev	-
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co"		
word "chartered," "professional association," or the abbreviation "P.A		5
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
,		
-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7	ASE 33
(Muning address MATT BEAT OST OF THE BOAY)		
-	1	중점기
	ω	SEACH FINANCE
D. If any address the arrivational areas and an address address address	in Florida, cotar the name of the	10 MD
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:		유동
N C.V B	39	
Name of New Registered Agent		
(Florida street	paaress)	
New Registered Office Address:	, Florida	
(Ci	ty) (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 Regi	istered 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	<u>PT</u> <u>Jol</u>	hn Doe			
X Remove	<u>V</u> <u>Mi</u>	ike Jones			
X Add	<u>SV</u> <u>Sal</u>	lly Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) X Change	UPDS	ROBERT	WERSTER SLYE	TR. 1804 1	PRADO ST
Add	WAS INCOM	CRECTLY LIS	TED AS ROBERT	- NAUARR	E FL 32566
Remove	INC, REQ	UEST CHA	ON ARTICLES OF NOE TO "JR",		
2) Change	HIS LEC	JAL NAMI			
Add		•			
Remove					
3) Change			- :	.	TA S
Add					——————————————————————————————————————
Remove					
4) Change					PH 3:
Add					
Remove					
5) Change		J			
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
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		بىر 113	X
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		. မ	(V)
		<u></u>	
		ب	Ċ
		39	7.
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	_	Y
provisions for implementing the ame	ndment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
			

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)	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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"	
by" (voting group)	- = =
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	SECRETAR ALLAHASS
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	TILED VRY OF VSSEEL
Dated_6/1/2015	STATE LORID
Signature July	>
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	