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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Siesta Key Beach	Consulting Cor	թ.		
DCUMENT NUMBER: P15000079593					
The enclosed Articles of Amen	dment and fee are su	ibmitted for fili	ng.		
Please return all correspondenc	e concerning this ma	itter to the follo	wing:		
		John Scama	ırdella		
	Name of Contact Person				
	Siesta Key Beach Consulting Corp.				
		Firm/ 0	Company		
	20 Bayhead Lane				
	Address				
	Osprey, Florida 34229				
		City/ State :	and Zip Cod	e	
			e u		
	jscama nail address; (to be u	rdella@matthe			
C-III	ian address, to be a	sed for future a	muai report	nonneamon)	
For further information concern	ing this matter, pleas	se call:			
John Scamardella		at (	917	609-0135	
Name of Contac	t Person	<del></del> -		de & Daytime Telephone Number	
Enclosed is a check for the follo	owing amount made	payable to the l	Florida Depa	artment of State:	
<del>-</del>	43.75 Filing Fee & ertificate of Status	S43.75 Fil Certified ( (Additional enclosed)	Гору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address				Address	
Amendment S		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

Siesta Key Beach Consulting Corp.

2019 FEB 19 AM 10: 25

(Name of C	Corporation as curre	ently filed with the Florida Dept. of State) CF STATE
P	15000079593	ALL - MISSEE, FL
	(Document Numbe	er of Corporation (if known)
Pursuant to the provisions of section 607.100 Articles of Incorporation;	06, Florida Statutes, tl	his Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name	e of the corporation:	
Siesta Key Beach Management Corp.		The new
	on "Corp," "Inc," o	ntion," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
		N/A
<ol> <li>Enter new principal office address, if a Principal office address <u>MUST BE A STR</u></li> </ol>		
The part office dadress 5000 PE 11 0 TH	, , , , , , , , , , , , , , , , , , ,	
. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		N/A
[,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1702 177.1	
). If amending the registered agent and/o	or rugistered office a	ddress in Florida, enter the name of the
new registered agent and/or the new r		
Name of New Registered Agent	N/A	
Name ty New Registered Agent		
_	/Florida	ı street address)
	N/A	i sireer uuuressy
New Registered Office Address:		Florida
		(Είγ) (Σίρ Couc)
<u>New Registered Office Address:</u>		(City) (Zip Code)
ew Registered Agent's Signature, if char	nging Registered Ago	ent:
		ar with and accept the obligations of the position.
	en	w 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3 ) Change		N/A 	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
6) Change		_	<del></del>
Add			
Remove			

	(Be specific)
N/A	
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

	N/A		
The date of each amendment(s	) adoption:		, if other than the
date this document was signed.			
Cecario da escandia de la	N/A		
Effective date <u>if applicable</u> :	(no more than 90	days after amendment file date)	
Note: If the date inserted in the document's effective date on the		ble statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were by the shareholders was/were		number of votes east for the amendment(s)	
		gh voting groups. The following statement te separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were	sufficient for approval	
by	(voting group)		
	(voting group)		
The amendment(s) was/were action was not required.	adopted by the board of directors w	rithout shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators withou	ut shareholder action and shareholder	
Febru Dated	ary 14, 2019		
	Do las	<del></del>	
Signature	Juli		
	_ ,	r - if directors or officers have not been	
		hands of a receiver, trustee, or other court	
арр	ointed fiduciary by that fiduciary)		
	John Scamardella		
	(Typed or printed na	ime of person signing)	
	President		
	(Title of	person signing)	<del> </del>