

DUNE WALK BY THE OCEAN CONDOMINIUM ASSOCIATION, INC.

7370 South Ocean Drive, Jensen Beach, Florida 34957

(772) 229-5004 (772) 229-0539 (fax)

**SALES TRANSFER APPLICATION
Corporation / Entity Addendum**

Legal Name of Entity: _____

Principal Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Registered Agent Name: _____ Address: _____

City: _____ State: _____ Zip: _____

President & Secretary / Trustee(s) / Partner(s) or Sole-Owner Information:

Name: _____ Title: _____ Phone: _____

Address _____ City: _____ State: _____ Zip: _____

Name: _____ Title: _____ Phone: _____

Address _____ City: _____ State: _____ Zip: _____

Name: _____ Title: _____ Phone: _____

Address _____ City: _____ State: _____ Zip: _____

The undersigned person does hereby certify that he or she is the officer, trustee, partner, or sole owner (circle one) authorized to (1) designate the single family or individual who shall be entitled to occupy, and (2) designate the adult person within this family to serve as the Head of Household and Voting Representative for Dune Walk Unit # _____ in accordance with the requirements of the Articles of Incorporation Section 4.4 and Declaration of Condominium Sections 4.2, 10, and 13.1 for Dune Walk by the Ocean Condominium Association, Inc.. No more than one change will be approved in any 12 month period.

Authorized to Designate (Signature)

Print Name

Date

CERTIFICATE OF APPOINTMENT
OF
VOTING REPRESENTATIVE
FOR
CORPORATION TITLED UNITS

To the Secretary of
Dune Walk by the Ocean
Condominium Association Inc.

THIS IS TO CERTIFY that the undersigned, constituting the President and Secretary of _____ (Corporate Name),

the record owner of Unit No. _____ in Dune Walk by the Ocean Condominium Association Inc., have designated the Unit's **Head of Household** as their representative to cast all votes and to express all approvals that owners may be entitled to cast or express at all meetings of the membership of the Association and for all other purposes provided by the Declaration, the Articles and the Bylaws of the Association.

This certificate is made pursuant to the Declaration and the Bylaws and shall revoke all prior Certificates and be valid until revoked by a subsequent certificate.

Dated this _____ day of _____, 201__

By: _____

Print Name: _____
as PRESIDENT

The foregoing instrument was acknowledged before me this _____ day of _____, 201__ by _____, as PRESIDENT, of _____

Corporation, who [] presented identification / [] is personally known to me.

By: _____

Print Name: _____
as SECRETARY

Note: This form is not a proxy and should not be used as such.

DUNE WALK BY THE OCEAN CONDOMINIUM ASSOCIATION, INC.
7370 South Ocean Drive, Jensen Beach, Florida 34957
(772) 229-5004

**DESIGNATED OCCUPANT(S)
ACKNOWLEDGEMENT OF RESPONSIBILITY**

Period of Designation (1 year minimum): Start: _____ End: _____
Designating Owner: _____ Unit #: _____

Designated Occupant(s)

(Head of Household and up to 5 additional members of his/her immediate single family)

#1: _____ (Head of Household) Phone: _____
Current Address: _____ City: _____ State: _____ Zip: _____
Employer Name & Address: _____

#2: _____ Relationship: _____ Age if Minor: _____
#3: _____ Relationship: _____ Age if Minor: _____
#4: _____ Relationship: _____ Age if Minor: _____
#5: _____ Relationship: _____ Age if Minor: _____
#6: _____ Relationship: _____ Age if Minor: _____

The above designated occupants are:

____ Guests according to Rule III. Occupant # ____ Relationship to Designating Owner: _____
____ Tenants. Please attach completed Lease Application for approval.

The Head of Household, named #1 above, is designated to serve as the voting member for Unit # _____.

Designating Owner Signature: _____ Title: _____ Date: _____

The following Acknowledgement of Responsibility is required from all adult occupants.

The designated occupant(s) acknowledges that they shall use the property and common elements in compliance with the governing documents of Dune Walk By the Ocean Condominium Association, Inc., that they are the sole single family residents and occupants of the property during the period of designation, and that the single family does not include more than six (6) members during the period of designation.

The designated occupant(s) further acknowledges that they are jointly and severally liable with the titled unit owner for all obligations and requirements under the Declaration, Bylaws, and Ground & Building Rules of Dune Walk by the Ocean Condominium Association, Inc. and by signature sign and consent to same by written designation as required by Section 13.1 of the Declaration.

*** Guests and Tenants are NOT permitted to bring pets to the Dune Walk property. ***

**DESIGNATED OCCUPANT(S)
ACKNOWLEDGEMENT OF RESPONSIBILITY**
Required by ALL Adult Occupants

Period of Designation (1 year minimum): Start: _____ End: _____

Unit Owner: _____ Unit #: _____

The undersigned designated occupant(s) acknowledges that they shall use the property and common elements in compliance with the governing documents of Dune Walk By the Ocean Condominium Association, Inc., that they are the sole single family residents and occupants of the property during the period of designation, and that the single family does not include more than six (6) members during the period of designation.

The undersigned designated occupant(s) further acknowledges that they are jointly and severally liable with the titled unit owner for all obligations and requirements under the Declaration, Bylaws, and Ground & Building Rules of Dune Walk by the Ocean Condominium Association, Inc. and by signature below sign and consent to same by written designation as required by Section 13.1 of the Declaration.

Signature _____ Print Name _____ Date

STATE OF FLORIDA
COUNTY: St. Lucie

The foregoing instrument was acknowledged before me this _____ day of _____, 201__ by
_____ as Designated Occupant of Unit # _____ of
DUNE WALK BY THE OCEAN CONDOMINIUM ASSOCIATION, INC. . who []presented identification /
[]is personally known to me.

Notary Public, State of Florida _____ Print Name

My commission expires: _____

Signature _____ Print Name _____ Date

STATE OF FLORIDA
COUNTY: St. Lucie

The foregoing instrument was acknowledged before me this _____ day of _____, 201__ by
_____ as Designated Occupant of Unit # _____ of
DUNE WALK BY THE OCEAN CONDOMINIUM ASSOCIATION, INC. . who []presented identification /
[]is personally known to me.

Notary Public, State of Florida _____ Print Name

My commission expires: _____