725881

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



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2009 OCT 26 P 1: 3
SECRETARY OF STATE
ALLAHASSEE, FLORID

Amend Thewis 10-28-09 FILED

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Pine Island Ridge Condominium F ASS. Inc.
DOCUMENT NUMBER: 725881
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John Back (Name of Contact Person)
Pine Island Ridge ando F ASS. Inc. (Firm/Company)
9420 Live Oak Place & 3
Davie Ha 33324 (City/State and Zip Code)
Live code Condo @ Comeas + Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
OAnn Fogarty at (954) 473 5939 (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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2009

JOHN BACK PINE ISLAND RIDGE CONDOMINIUM F ASSOC. 9420 LIVE OAK PLACE DAVIE, FL 33324

SUBJECT: PINE ISLAND RIDGE CONDOMINIUM F ASSOCIATION, INC.

Ref. Number: 725881

We have received your document for PINE ISLAND RIDGE CONDOMINIUM F ASSOCIATION, INC. and check(s) totaling \$43.75. However, your check(s) and document are being returned for the following:

If there are <u>MEMBERS ENTITLED TO VOTE</u> on a proposed amendment, the document must contain: (1) the date of adoption of the amendment by the members and (2) a statement that the number of votes cast for the amendment was sufficient for approval.

If there are <u>NO MEMBERS OR MEMBERS ENTITLED TO VOTE</u> on a proposed amendment, the document must contain: (1) a statement that there are no members or members entitled to vote on the amendment and (2) the date of adoption of the amendment by the board of directors.

Please note the money amounts differ on the check. The amount wrote in is for forty seven dollars instead of forty three dollars. Please send a corrected check for the proper amount.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 709A00031158

Articles of Amendment

to

Articles of Incorporation

	of		• / : =
tine Island Ride	ge Cor	ndominium F	Association, Inc.
(Name of Corporation as current	ly filed with t	the Florida Dept. of State)	•
7258	81		
(Document Numbe	r of Corporati	on (if known)	•
Pursuant to the provisions of section 617.1006, Flo the following amendment(s) to its Articles of Incompared	rporation:		poration adopts
A. If amending name, enter the new name of th	e corporatio	<u>n:</u>	İ
The new name must be distinguishable and conteabbreviation "Corp." or "Inc." "Company" or "			" or the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	TALLAHASSEE, FLO	FILED
D. If amending the registered agent and/or regi	stered office	address in Florida, enter the ma	me the
new registered agent and/or the new register	ed office add	ress:	:
Name of New Registered Agent:	<u>ohn</u>	Back	
New Registered Office Address:	9420 (Florid	Live Oak Pl. da street address)	
	Davie	(City), Florida	33324 Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered ag position.			igations of the

of New Registered Agent, if changing



PHASE F CONDOMINIUM ASSOCIATIONS, INC. 9420 LIVE OAK PLACE DAVIE, FL 33324 PHONE 954-472-5939 FAX 954-472-5913 liveoakcondo@comcast.net

DELETE

DELETE

DELETE

AUGUST 31, 2009

MARSHA STRONKO

DELORES MARTIN

SEAN MCCLOSKEY

JOHN BACK **PRESIDENT** ADD/CHANGE **9420 LIVE OAK PLACE #103** DAVIE, FLORIDA 33324 JEFFERY COLLINS VICE PRESIDENT ADD **9450 LIVE OAK PLACE #104** DAVIE, FLORIDA 33324 PAULA CLANCY **TREASURER** ADD 9931 WINDING RIDGE LANE **DAVIE, FLORIDA33324** WENDY VOSS **SECRETARY ADD** 9430 LIVE OAK PLACE#201 **DAVIE, FLORIDA 33324** JOANN FOGARTY DIRECTOR ADD/CHANGE **9400 LIVE OAK PLACE #105 DAVIE. FLORIDA 33324 DENISE REGAN DIRECTOR** ADD/CHANGE **9400 LIVE OAK PLACE #203 DAVIE, FLORIDA 33324** LISA JORASKIE **DIRECTOR** ADD/CHANGE **9410 LIVE OAK PLACE #205** DAVIE, FLORIDA 33324

The date of each amendment(s) ad	loption:
Effective date <u>if applicable</u> :	(date of adoption is required)
<u>n appiration</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated 9/15	3/09
Signature	100 President
have not l	fairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	John Back John Back (Typed or printed name of person signing)
	President
	(Title of person signing)