## NO3000003962

(Re	equestor's Name)	<del></del>
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Amend

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## **COVER LETTER**

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2415 N. Monroe Street, Suite 810 Tallahassee, PL 32303

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	GARDENS CONDO	OSSA MUINIM	CIATION, INC.	
N03000003962	. <u> </u>			
The enclosed Articles of Amendment and fee a	are submitted for filing	g.		
Please return all correspondence concerning th	is matter to the follow	ring:	•	
Keri Lynda Horvat, Esq.				
	(Name of Con	tact Person)		
The Horvat Law Firm, PLLC				
	(Firm/ Co	mpany)		
2525 Ponce de Leon Blvd., Suite 300				
	(Addr	ess)		
Corul Gables, FL 33134				
	(City/ State an	d Zip Code)		
klynda@horvatlawfirm.com				
E-mail address: (to l	be used for future ann	ual report notifica	stion)	····
For further information concerning this matter,	please call:			
Keri Lynda Horvat, Esq.		305 at	450.2825	
(Name of Contact	Person)	(Area Coo	le) (Daytime Tele	phone Number)
Enclosed is a check for the following amount m	rade payable to the Fl	orida Departmen	t of State:	
■ \$35 Filing Fee □\$43.75 Filing F  Certificate of \$		oopy is Co (A	2.50 Filing Fee crificate of Status crified Copy additional Copy is nelosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Addre Amendment S Division of C The Centre C	Section	

## Articles of Amendment to Articles of Incorporation of

200 P. (C)

WESTLAND GARDENS CONDOMINIUM ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N03000003962 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new pame of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ٠.,٠ C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address; The Horvat Law Firm, PLLC Name of New Registered Agent: 2525 Ponce de Leon Blvd., Suite 300 (Florida street address) New Registered Office Address: Coral Gables Florida (City) (Zip Code)

I hereby accept the appointment as registered agent. I am fairliliar with and accept the obligations of the position.

New Registered Agent's Signature, if changing Registered Agent:

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= Trustcc; 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 X Remove X Add	<u>PT</u> Y <u>S</u> Y	John De Mike Jo Sally Sr	ncs	
Type of Action (Check One)	Title		Name	Address
1) Change Add		_		
Remove				
2) Change Add		_	·	
Remove 3) Change Add Remove		-		
4) Change Add				
Remove				
5) Change Add	<del></del>	-		
Remove				
6) Change Add		-		
Remove				
E. If amending or adding (attach additional sheet)	additions, if neces	nal Artis ssary).	iles, enter change(s) here: (Be specific)	
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The date of each amendment(s) and date this document was signed.	ioption:		· ,	· ·	if other than the
•					
Effective date <u>if applicable</u> :				<del></del>	
·	(no more than 90 days a	țier amendmeni j	nie date)	• •	*
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable partment of State's records.	e statutory filing	requirements,	this date will r	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	•			
☐ The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the	number of votes	cast for the an	nendment(s)	

Dated	April 2, 2020
Date	( v/)
	The true and the
Signature	The state of the state of the officer officer of director
(	By the chairman or vice chairman of the board, prosident or other officer-if director, have not been selected, by an incorporator — if in the hands of a receiver, trustee, or
	18745 line occur referent ha an introduction in the intring of a continue in the intrinsical continues of a con
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary)  JORGE L. MARTINEZ

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were