N98000005560

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

NOV 25 PM 3:

C. LEWIS

DEC 2 2013

EXAMINER

COVER LETTER

TO: Amendment Section ** Division of Corporations	% ,	ag V
Secluded Gard	lens of Key West	
N98000005560		
The enclosed Articles of Amendment and fee are sul	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Gary Rivenson		
	(Name of Contact Person	n)
Secluded Gardens of Key West		
	(Firm/ Company)	
907 United St		
	(Address)	
Key West, FL 33040		
	(City/ State and Zip Cod	e)
grivenson@gmail.com		
E-mail address: (to be use	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Gary Rivenson	610	417-4278
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	∠ □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		dment Section on Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32314		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Secluded Gardens of Key West Lendemin (Name of Corporation as currently filed with the FI N98000005560	orida Dept. of State)	, Inc.	
(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Profit Corpor</i>	ration adopts the following	
A. If amending name, enter the new name of the corpora n/a	tion:	The new	
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbrev		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	n/a	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	SECRETAR SECRETAR TALLAHASS	
		Y OF SIAI	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	<u>fice address in Florida, enter the nam address:</u>	e of the	,
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
	, Florida		
(City	?)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		of the position.	

Page 1 of 4

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 = 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 X Remove X Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change		
Add		
Remove		
2) Change		
Add		
Remove	Δ/Δ	
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If athending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE V, Utilization: Restrictions, E. Leases. Utilization: Restrictions E. Leases.
Each unit shall be leasable to the full extent permitted by City of Key West
laws, ordinances and codes. The Association shall have the right to terminate the lease
upon the tenant's default under the provisions of this Declaration, the Articles of
Incorporation, the By-Laws, the Rules and Regulations and/or any other applicable
provisions of any agreement, document or instrument governing the Condominium.
The Unit Owner shall be liable, jointly and severally with the tenant,
to the Association for any costs and expenses of repairing such damages
resulting from the tenants acts or omissions.

			APPROVED
	date of each amendment(s) ad this document was signed.	option:	F// Afforther than the
	ective date if applicable:	11/10/13	13 NOV 25 PM 3: 10
		(no more th a n 90 days after amendment file date)	13 NOV 25 PM 3: 10 SECKLIARY OF STATE TALLAHASSEE, FLORIDA
Ada	option of Amendment(s)	(CHECK ONE)	····on
	The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the l.	amendment(s)
	There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendment(rs.	s) was/were
	11/10/13 Dated		
	Signature		
	have not bee	man or vice chairman of the board, president or other office on selected, by an incorporator – if in the hands of a received appointed fiduciary by that fiduciary)	
	Gary Rivenso	n	
	President	(Typed or printed name of person signing)	_
		(Title of person signing)	_