

709242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

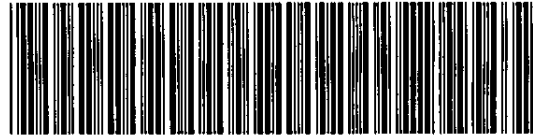
(Business Entity Name)

(Document Number)

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FILED
OCT 21 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amd
OCT 22 2013
R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2013

JOSE R. RINTO (2ND ATTMPT)
NORTH BAY WHITE HOUSE ASSOCIATION NO 1
1800 79 ST CAUSEWAY #211
NORTH BAY VILLAGE, FL 33141

SUBJECT: NORTH BAY WHITE HOUSE ASSOCIATION NO. 1, INC.
Ref. Number: 709242

We have received your document for NORTH BAY WHITE HOUSE ASSOCIATION NO. 1, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 913A00023870

RECEIVED

13 OCT 21 PM 4:19

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NORTH BAY WHITE HOUSE ASSOCIATION NO. 1 INC.

DOCUMENT NUMBER: 709242

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE R. PINTO
(Name of Contact Person)

NORTH BAY WHITE HOUSE ASSOCIATION NO. 1 INC.
(Firm/ Company)

1800 79 ST CAUSEWAY # 211
(Address)

NORTH BAY VILLAGE, FL 33141
(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE R. PINTO at (305) 409-2316
(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 & Certificate of Status
- \$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
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

OCT 21 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NORTH BAY WHITE HOUSE ASSOCIATION, NO. 1, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
709242

(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 name of the corporation:

The new 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**)

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:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address: _____

(City)

Florida

(Zip Code)

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

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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title Name

Address

1) <input type="checkbox"/> Change	<u>P</u>	<u>PEREZ, ILIANA</u>	<u>1800 KENNEDY CAUSEWAY</u>
<input type="checkbox"/> Add			<u>NORTH BAY VILLAGE, FL 33141</u>
<input checked="" type="checkbox"/> Remove			

2) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>RESTREPO, GLORIA</u>	<u>1800 KENNEDY CAUSEWAY # A-302</u>
<input type="checkbox"/> Add			<u>NORTH BAY VILLAGE, FL 33141</u>
<input type="checkbox"/> Remove			

3) <input type="checkbox"/> Change	<u>P</u>	<u>RONDON, JENNY</u>	<u>8299 CORAL WAY</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33155</u>
<input checked="" type="checkbox"/> Remove			

4) <input type="checkbox"/> Change	<u>S</u>	<u>STEIGER, JOAN</u>	<u>1800 79 ST. CAUSEWAY # A-201</u>
<input checked="" type="checkbox"/> Add			<u>NORTH BAY VILLAGE, FL 33141</u>
<input type="checkbox"/> Remove			

5) <input type="checkbox"/> Change	<u>D</u>	<u>GONZALEZ, SANTIAGO E.</u>	<u>1000 79 ST. CAUSEWAY # A-307</u>
<input checked="" type="checkbox"/> Add			<u>NORTH BAY VILLAGE, FL 33141</u>
<input type="checkbox"/> Remove			

6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 5-8-2013 If other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated: 9-25-13

Signature: [Handwritten Signature]
(By the Chairman or vice Chairman of the board, president or other officer-if directors have not been selected, by an incorporator - If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

[Handwritten Name]
(Typed or printed name of person signing)

President N.P.W.A. # 1 Association
(Title of person signing)