

711826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

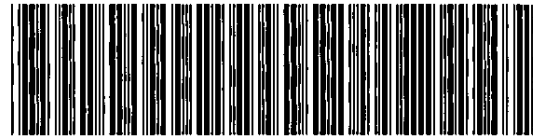
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100290110031

09/16/16--01003--003 **35.00

2016 SEP 26 PM 2:25
SECRETARY OF STATE
DIVISION OF CORPORATIONS

SEP 29 2016

C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2016

BAL HARBOUR CONDOMINIUM ASSOC INC
86 MACFARLANE DRIVE
DELRAY BEACH, FL 33483 US

SUBJECT: BAR HARBOUR CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 711826

We have received your document for BAR HARBOUR CONDOMINIUM ASSOCIATION, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 916A00016552



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2016

BAL HARBOUR CONDOMINIUM ASSOC INC
86 MACFARLANE DRIVE
DELRAY BEACH, FL 33483 US

SUBJECT: BAR HARBOUR CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 711826

We have received your document for BAR HARBOUR CONDOMINIUM ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

We are enclosing the proper form(s) with instructions for your convenience.

You will need to email the new principal address if the one on your annual report is wrong. The officers and directors are correct with the annual report filed for 2016. If you have changes you will need to file an amendment form.

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

Carolyn Lewis
Regulatory Specialist II

Letter Number: 916A00016552

Enclosed
ch # 3464 8/29/16

16 SEP 16 10 39 AM
16 SEP 16 10 39 AM
16 SEP 16 10 39 AM
16 SEP 16 10 39 AM
16 SEP 16 10 39 AM

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BAR HARBOUR CONDOMINIUM ASSOC INC

DOCUMENT NUMBER: 711826

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

Please return all correspondence concerning this matter to the following:

DONNA CRANDALL, GM
(Name of Contact Person)

BAR HARBOUR CONDO ASSOC INC
(Firm/ Company)

86 MACFARLANE DRIVE
(Address)

DELRAY BEACH, FL 33483
(City/ State and Zip Code)

JACKIE M @ LANGMANAGEMENT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DONNA CRANDALL at 561- 278-5000
(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

2016 SEP 26 PM 2: 25

Bar Harbour Condominium Assoc., Inc.

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

711826

(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:

N/A

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)

86 MACFARLANE DRIVE
DELRAY BEACH, FL
33483

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

C/O LANG MANAGEMENT
790 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487

Ste
200

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:

N/A

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

| Type of Action (Check One) | Title | Name | Address |
|------------------------------------|-------|------|---------|
| 1) <input type="checkbox"/> Change | | N/A | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

The date of each amendment(s) adoption: _____
date this document was signed. FILED
SEP 26 2016
DIVISION OF CORPORATION

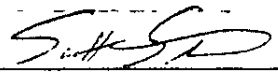
Effective date if applicable: _____
(no more than 90 days after amendment file date) 2016 SEP 26 PM 2:25

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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: 9/27/16

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)

SCOTT STETTNER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)