716025

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	ROLLING GREEN C	CONDO "F" INC		
DOCUMENT NUMBER:	716025			
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
FRAN BROWN				
	(Name of Contact Person	1)	
ROLLING GREEN CONDO) "F" INC			
		(Firm/ Company)		
1301 NE 191 ST				
		(Address)		
MIAMI FL., 33179				
•	(City/ State and Zip Code	e)	
rolling369@hotmail.com				
. E	-mail address: (to be used	for future annual report r	notification)	
For further information conc	erning this matter, please o	call:		TALL
FRAN BROWN		at	5 948 8055	
	(Name of Contact Person)	(Ar	rea Code) (Daytime Telep	[] 4,
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida Depa	artment of State:	PR C
■ \$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

Arti	cles of Incorpo	ration	
	of		6 1
ROLLING GREEN CONDO "F" INC		,	200 4 1
(Name of Corporation as cur	rently filed wit	h the Florida Dept. of State)	TO BY
716025			20
(Document Nu	mber of Corpor	ation (if known)	adopts the following
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Flori</i>	da Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpo	ration:		
N/A			The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "inc	corporated" or the abbreviation	
	N/A		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE.			
(1 melpa office and to insert a second	<u></u>		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
(Mailing address MAT BE A FOST OFFICE BOX)			
			•
D. If amending the registered agent and/or registered of new registered agent and/or the new registered officers.	office address i ce address:	n Florida, enter the name of t	<u>ne</u>
N/A			
Name of New Registered Agent:			
New Registered Office Address:		(Florida street address)	
New Registered Office Address.			
		, Flori	
	(City)	(Zi _j	o Code)
New Registered Agent's Signature, if changing Registe	red Agent:		
I hereby accept the appointment as registered agent. I am	n familiar with a	and accept the obligations of th	e 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: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	LUCIANO , REGAZZI	1301 NE 191 ST APT 211
X Add			MIAMI FL., 33179
Remove			
2) Change	T	COHEN, RACHELLE S	1301 NE 191 ST APT 404
Add			MIAMI FL., 33179
X Remove	VP	SOSA, JOSE B	1301 NE 191 ST APT 403
3) Change Add	<u></u>		MIAMI FL., 33179
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 		
Add			
Remove		B 8 5 1	

E. If amending or adding additional Ar (attach additional sheets, if necessary).	ticles, enter char	nge(s) here:				
(anach adamonai sneets, if necessary).	(be specific)					
N/A						
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	•		07/21/2016	
	date of each amer this document was	. ` '		, if other than the
Effe	ctive date <u>if appli</u>	07/21/ cable:	2016	
		_	(no more than 90 days after amendment file date)	
Note docu	e: If the date insert iment's effective da	ed in this block te on the Depa	does not meet the applicable statutory filing requirements, this date rtment of State's records.	will not be listed as the
Ađo	ption of Amendmo	ent(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien		pted by the members and the number of votes cast for the amendmen	nt(s)
	There are no memi		rs entitled to vote on the amendment(s). The amendment(s) was/wer	re
	Dated	07/21/2016		
	Signature	From	v. l. Bown	
	!	have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, of pointed fiduciary by that fiduciary)	
		FRAN BR	OWN	
		 	(Typed or printed name of person signing)	~
		PRESIDE	V T	
			(Title of person signing)	-