

716196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

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MAIL

(Business Entity Name)

(Document Number)

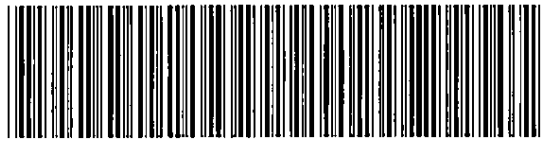
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FILED
23 MAY 17 PM 6:08
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2023

GIANNA RIVERA
19950 W. COUNTRY CLUB DRIVE
10TH FLOOR
AVENTURA, FL 33180 US

SUBJECT: THE REGENCY CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 716196

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

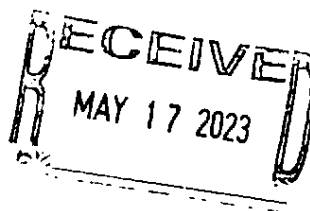
WE DO NOT FILE TERMINATIONS.

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 623A00009871



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE REGENCY CONDOMINIUM ASSOCIATION, INC. a Florida Not for Profit corporat

DOCUMENT NUMBER: 716196

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

Please return all correspondence concerning this matter to the following:

Gianna Rivera

(Name of Contact Person)

Fontainebleau Development

(Firm/ Company)

19950 W. Country Club Drive, 10th Floor

(Address)

Aventura, Florida 33180

(City/ State and Zip Code)

grivera@fbdev.com

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

For further information concerning this matter, please call:

Gianna Rivera

305

682-4162

at

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

THE REGENCY CONDOMINIUM ASSOCIATION, INC., a Florida Not for Profit corporation

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

THE REGENCY CONDOMINIUM ASSOCIATION, INC.

(Document Number of Corporation (if known))

FILED
23 MAY 17 PM 6:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

(Florida street 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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V & S</u>	<u>Shervel Kass</u>	<u>19950 W. Country Club Drive, 10th</u> <u>Aventura, Florida 33180</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Brett Mufson</u>	<u>19950 W. Country Club Drive, 10th</u> <u>Aventura, Florida 33180</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Phil Perko</u>	<u>19950 W. Country Club Drive, 10th</u> <u>Aventura, Florida 33180</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Donna Robinson</u>	<u>10 SE Central Parkway Suite 400</u> <u>Stuart, FL 34994</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Linda Neenan</u>	<u>10 SE Central Parkway Suite 400</u> <u>Stuart, FL 34994</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Jennifer Ressiman</u>	<u>10 SE Central Parkway Suite 400</u> <u>Stuart, FL 34994</u>

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

<u>X - Remove</u>	<u>James Mc Guire</u>	<u>V</u>	<u>10 SE Central Parkway Suite 400, Stuart, FL 34994</u>

☒ 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 11/30/2023

Signature Sheryl Kass
(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)

Sheryl Kass
(Typed or printed name of person signing)

Vice President
(Title of person signing)