## 722205

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(City/State/Zip/Phone #)
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SECRETARY OF STATE

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## COVER LETTER

TO: Amendment Section Division of Corporations

FAIRHAVEN	N 11 MAINTENANCE ASSOCIATION, INC.
722205	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Sherrie Gottesman	
	(Name of Contact Person)
Esler and Lindie, P.A.	
	(Firm/ Company)
400 SE 6th Street	
	(Address)
Fort Lauderdale, FL 33301	
	(City/ State and Zip Code)
sg@eslerandlindie.com; blindic@eslerandlind	ie.com
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
Sherrie Gottesman	954 764-5400 at
(Name of Contact	
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of \$	Fee & DS43.75 Filing Fee & DS52.50 Filing Fee  Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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



May 22, 2018

SHERRIE GOTTESMAN 400 SE 6TH STREET FORT LAUDERDALE, FL 33301

SUBJECT: FAIRHAVEN 11 MAINTENANCE ASSOCIATION, INC.

Ref. Number: 722205

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):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 018A00010642

www.sunbiz.org

Diri (O () DOD



May 9, 2018

SHERRIE GOTTESMAN 400 SE 6TH STREET FORT LAUDERDALE, FL 33301

SUBJECT: FAIRHAVEN 11 MAINTENANCE ASSOCIATION, INC.

Ref. Number: 722205

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):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please check the appropriate action regarding number 5.

The date of adoption of each amendment must be included in the document.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 618A00009617

## Articles of Amendment to

,	Articles of Incorporation	
Fairhaven II M	<u>1aintenance</u>	ASSOCIATION;
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)
7222	05	
(Document	t Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated	The new 1" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of Name of New Registered Agent:		enter the name of the
New Registered Office Address:	(F)	orida street address)
_		Florida
	(City)	(Zi;: 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

Page 1 of 4

2010 JUN -4 PM 4: 49
SECRETARY OF STATE

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>V</u> <u>Mil</u>	n Doe te Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	PETARDI. ELEANOR	8200 NW 58TH STREET
Add			TAMARAC, FL 33321
X Remove			
2) X Change	PD	VODNIK, JAMES	8304 NW 57th PL
Add			TAMARAC, FL 33321
Remove			
3 ) Change	VPD	TAYLOR, JACQUELINE	5720 NW 81ST AVE
Add			TAMARAC, FL 33321
X Remove			
4) Change	VD	CASTRO, EILEEN	8407 NW 58TH PL
X Add			TAMARAC, FL 33321
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or ac (attach additional)	Iding additional Artic sheets, if necessary).	cles, enter change (Be specific)	e(s) here:			
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The date of each amendment(s) ado	ption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will not artiment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated $\frac{4/20}{1}$	6/18	
Signature	ner Vollnik	_
	nan or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or	
	pointed fiduciary by that fiduciary)	
JAMES V	ODNIK	
	(Typed or printed name of person signing)	
_PRE	SIDENT	
	(Title of person signing)	