724628

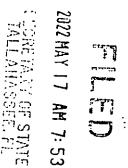
(Req	uestor's Name)	
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A. BUTLER
JUL 2 2 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	CASTLE #11 CONI	DOMINIUM, INC.	•			_
	724628		•			
DOCUMENT NUMBER:				-	· ·	_
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this matt	er to the following	:			
Rafal Kuta						
		(Name of Contact	Person)			_
Castle #11 Condominium, I	nc					
		(Firm/ Comp	any)			_
4750 NW 22nd Ct						
		(Address))			_
Lauderhill, FL 33313						
		(City/ State and Z	ip Code)	1		_
pm.cgb11@gmail.com						
I	E-mail address: (to be use	d for future annual	report n	otification	1)	_
For further information con-	cerning this matter, please	e call:				
Thom Johnson			954 at		471-4414	
	(Name of Contact Person			a Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florid	da Depar	tment of	State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cope cnclosed)		Certifi Certifi	Difiling Fee cate of Status ed Copy cional Copy is sed)	
Mailing /	Address		Street A	ddress	on	

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

FILED

	••	لريا سيا استا
		2622 May
same of Corporation as currently filed with the F	lorida Dept. of State)	2022 MAY 17 AM 7:
		SECRETARY OF A-
(Documen	it Number of Corporation (if known)	SEGRETARY OF STA
presuant to the provisions of section 617.1006, Florid mendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Cor	
If amending name, enter the new name of the c	orporation:	
		The new
ime must be distinguishable and contain the word "company" or "Co." may not be used in the name.		previation "Corp." or "Inc."
Enter new principal office address, if applicable principal office address MUST BE A STREET ADD		
meiput office unaress MOST DE NOTKEET MOZ		
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BC	<u></u>	
		Call .
. If amending the registered agent and/or registered new registered agent and/or the new registered		ame of the
new registered agent and/or the new registered	onice address.	
Name of New Registered Agent:		
-	(Florida street add	dress)
New Registered Office Address:		
		, Florida
-	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.		one of the position
wreny accept the appointment as registered agent.	1 am jamutar wun ana accept the obtigation	ons 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	BOISSE, LUC	4750 NW 22nd Ct Lauderhill, FL 33313
x Remove			
2) Change Add	<u>D</u>	GOUIN, DONALD	4750 NW 22nd Ct Lauderhill, FL 33313
x Remove Change Add Remove	<u>T</u>	JOE SCOLARICI	4750 NW 22nd Ct Lauderhill, FL 33313
4) Change Add	D	ROCK PILON	4750 NW 22nd Ct Lauderhill, FL 33313
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			-

•		
		·
<u> </u>		
		
		
	5/9/2022	
The date of each amendment	(s) adoption:	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	5/9/2022	
	(no more than 90 days after amendment file a	date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing require Department of State's records.	irements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

	5/12/2022 Dated
	Jaied
;	Signature Signature
	(By the chairman of 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)
	THOM-JOHNSON- Thomas Johnson
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)