727206

(Re	questor's Name)	
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(City	y/State/Zip/Phone	· th
(Oil	protector Elph Holle	. ",
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PUMPKIN C	ay Condominium Apanmonts
DOCUMENT NUMBER: 7272(56
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
Javier Pere	e of Contact Person)
31 Ocean Ra	of DNUE Suite C303 (Address)
Hey Largo, i	-1. 33037
(City/	State and Zip Code)
JOVIEV. PEVEZ (0 E-mail address: (10 be used for 4)	marguis hoa. com
For further information concerning this matter, please call:	·
Javer Perez (Name of Contact Person)	at 305 307-9160 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:
(Ac	3.75 Filing Fee & S52.50 Filing Fee rtified Copy Certificate of Status dditional copy is Certified Copy closed) (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



August 27, 2019

JAVIER PEREZ 31 OCEAN REEF DRIVE SUITE C 303 KEY LARGO, FL 33037

SUBJECT: PUMPKIN CAY CONDOMINIUM APARTMENTS NO. 12, INC.

Ref. Number: 727206

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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

Please list the street address of each officer/director.

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: 219A00017736

www.sunbiz.org

Articles of Amendment

to Articles of Incorporation

	of		1	
Pumpkin Cay Condo	minium /	Apartments N	10 12,	111
	urrently filed with the F	lorida Dept. of State)	,	
727206		<u> </u>		
(Document ?	Number of Corporation (i	f known)		
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not	For Profit Corporation adopts th	e following	
A. If amending name, enter the new name of the corp	poration:			
Na.			The new	
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	rporation" or "incorpora	ited" or the abbreviation "Corp."	or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	n/a			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	, <u>nla</u>			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:		da, enter the name of the		
<u> </u>				
New Registered Office Address:		(Florida street address)		
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I detected agent.	tered Agent: am familiar with and acc	ept the obligations of the position		
	Signature of New Re	gistered Agent, if changing	2019 NUA -8	
		•	8 PH 4: 57	. l

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>Mik</u>	<u>i Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change Add	<u>VP</u>	andrew Katlin	31 Ocean Reef Dr. Suite C303
Remove	0		Kcy Largo, Fl. 33037
2) X Change Add	<u>S</u>	Richard Riley	<u>31 Ocean Reef D</u> r. Suite C303
Remove			Key Largo, A.3303
3) Change			
Remove			
4) Change Add			
Remove			
5) Change			
Add			
6) Change	.		
Add			
Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	
	NA
	[]
	

	e date of each amendment(s) adoption: July 9, 2019 , if other than the this document was signed.
Eff	(no more than 90 days after amendment file date)
<u>vot</u> loc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
kde	option of Amendment(s) (CHECK ONE)
X	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
	Signature Jolan Mursan
	(By the chairman or vice chairman of the board, president of 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)
	Robert Murray
	(Typed or printed name d person signing)
	President
	(Title of person signing)