## 728100

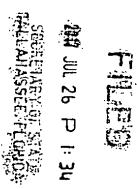
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## **COVER LETTER**

COVERDI	7.1117.K
FO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Sandalwood	Condominium Associatu
DOCUMENT NUMBER: 28100	<u> </u>
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	ng:
Caridad Penez	
(Name of Conta	act Person)
Sandal wood Condominiu	m Association, Inc
(Firm/ Con	npany)
802 NW 87 AVR. (OFFICE	= ) '
(Addre	ss)
Mipmi, FL 33172	2
(City/ State and	•
E-mail address: (to be used for future annu	
For further information concerning this matter, please call:	
Caridad Penez	at 786-560-2933
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flo	rida Department of State:
/	•
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Certificate of Status Certified Cop	
(Additional c	opy is Certified Copy
enclosed)	(Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

of (Name of Corporation as currently filed with the Florida Dept. (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation: 4. If amending name, enter the new name of the corporation: 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. 3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) 2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) ). 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: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Signature of New Registered Agent, if chan Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and iddress 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 xecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office ield. 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.

i change, Mike Jones l Aike Jones, V as Remo	eaves the cove, and Sa	orporation, Solly Smith, SV c	ally Smith is named t as an Add.	he V and S. These sho	ould be noted as John Doe, PT as a Change,
Example:				1	
X Change	$\underline{PT}$	<u>John Doe</u>			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>\$V</u>	Sally Smith			
Check One)	<u>Title</u>	<u>Na</u>	<u>me</u>		Address
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			Page	2 of 4	

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)

Example:

Please note the officer/director title by the first letter of the office title:

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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.

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>		<u>Addres</u> s
7) K Change 2	V Ad	Myciar olicess Vice Preside		OFFICE.
Remove  Change	<u></u>	_V-160-41-6-516-6	Torrente	19/10mi, F1 3317 802 NW 87AT.
Add Remove 3) Change				OFFICE: MIRMILF133170
Add				
4) Change Add Remove				
5) Change Add			! :	
Remove		_	1	
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E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
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The date of each amendment(s) adoption: 5/1/2017 late this document was signed.	_, if other than the
Effective date if applicable:	<del></del>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be locument's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 7/23/2017	
Signature	_
(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)	
Caridad Penez	
(Typed or printed name of person signing)	