## 730143

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	nium Association		
730143 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitt			
Please return all correspondence concerning this matter to	o the following:		
Robin Koran			
(N	ame of Contact Per	rson)	
Sandy Circle Condominium Association			
	(Firm/ Company)	)	
1730 Sandy Circle #212			
	(Address)		
Cape Coral, FL 33904			_
(C	ity/ State and Zip C	Code)	
Isandyeirele@gmail.com			
E-mail address: (to be used to	r future annual repo	ort notification	)
For further information concerning this matter, please cal	ll:		
Robin Koran	at	267	241-7472
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payal	ble to the Florida D	Department of S	State:
(	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section	Street Address Amendment Section		

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 of

Sandy Circle Condominium Association

(Name of Corporation as currently filed with the Florida Dept. of State) 730143 (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 amendment(s) to its Articles of Incorporation: A. 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. 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: (Florida street address) New Registered Office Address: (Zip Code) (City) 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:  X Change X Remove X Add		<u>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Richard Baer	1730 Sandy Circle #210 Cape Coral, FL 33904
X Remove  2) Change Add	<b>a</b> V	Ed Moore	1730 Sandy Circle #208 Cape Coral, FL 33904
Remove 3) X Change Add Remove	D	Fred Fanning	1730 Sandy Circle #202 Cape Coral, FL 33904
4) <u>×</u> Change Add	PT	Robin Koran	1730 Sandy Circle #212 Cape Coral, FL 33904
Remove  5) Change Add Remove			
6) Change Add			7.X.
E. If amending or add		rticles, enter change(s) here; (Be specific)	ALLAHASSEE, FLORIDA
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The date of each amendment(s) as ate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	ne)
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were as was/were sufficient for approve	dopted by the members and the number of votes cast al.	for the amendment(s)

•

Dated 6/24/22
Signature ALO Lo-
(Bythe 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)
ROBIN D KONAN
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

022 JUL -5 AMII: 5