739572

(Requestor's Name)
(Address)
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11/30/20--01031--007 **35.00

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: First Financial Pla	za Condominium Associati	on, Inc.	
DOCUMENT NUMB	ER:			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
		Angelo Anzalone		
-		Name of Contact Person	<u> </u>	
	First	Financial Plaza Condomini	om Association, Inc.	
-		Firm/ Company		
	639 E Ocean Ave., Suite 205			
-	Address			
	Ī	Boynton Beach, FL 33435		
-		City/ State and Zip Code	C	
		kim@veritaslegalplan.com		
-	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, plea	se call:		
Kimberly Crane		561 at (404-9798	
Name o	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee	
Tallahassec, FL 32314		2415 }	N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

-- -- 2:05

First Financial Plaza Condor	ninium Association, Inc.
(Name of Corporation as current	ly filed with the Florida Dept. of State)
739572	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	639 E. Ocean Ave., Suite 205
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Boynton Beach, FL 33435
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	639 E Ocaen Ave., Suite 205 Boynton Beach, FL 33435
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent N/A	
(Florida s.	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of Nov	Revistered Avent if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u> <u>Jol</u>	John Doe		
X Remove	<u>Y</u> <u>Mi</u>	ke Jones		
X Add	<u>SV</u> <u>Sal</u>	lly Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	D	McGoey, Dawn	639 E Ocean Ave., Suite 101	
Add			Boynton Beach, FL 33435	
X Remove				
2) Change	TD	McGoey, Michael	639 E Ocean Ave., Suite 101	
Add			Boynton Beach, FL 33435	
X Remove 3) X Change	VPT	Hauck, Doug	639 E Ocean Ave., Suite 205	
Add			Boynton Beach, FL 33435	
Remove				
4) X Change	<u> </u>	Heatherly, Casey Doran	639 E Ocean Ave., Suite 109	
Add			Boynton Beach, FL 33435	
Remove				
5) Change	D	Heatherly, Jason	639 E Ocean Ave., Suite 109	
X Add			Boynton Beach, FL 33435	
Remove				
6) Change				
Add				
Remove				

ttach additional shee	g additional Articles, as, if necessary).— (B	e specific)				
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an amendment pro	vides for an exchang	e, reclassificatio	n, or <u>cancellation</u>	of issued shares,		
rovisions for imple	menting the amendn	ent if not conta	ined in the amend	<u>iment itself:</u>		
(if not applicable	i, indicate N/A)					
					* **	
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A 10 - 10 - 10 - 10 - 10 - 10 - 10 -						

The date of each amendment(s) ado	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, triment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amend cient for approval.	lment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The following such voting group entitled to vote separately on the amendment(s	tatement E
"The number of votes cast for by /st francial	r the amendment(s) was/were sufficient for approval Plaza Conteminum Arsistim. (voting group)	
Signature(By a dire selected,	ctor president or other officer – if directors or officers have not by an incorporator—if in the hands of a receiver, trustee, or other	
appointed	(Typed or printed name of person signing)	
_	(Typed or printed name of person signing)	
_	PRESIDENT	
	(Title of person signing)	