741528

| (Re | questor's Name) | · · |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | · |
| | | |
| | | |





600272546186

05/04/15--01041--004 **35.00

15 HAY -4 PH 12: 54

(Pm 5-12-15

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | RK RESIDENCES C | ONDOMIMIUM ASSOCIATION INC |
|--|--|--|
| DOCUMENT NUMBER: 741528 | | بر ت ت برابا |
| The enclosed Articles of Amendment and fee are sub- | mitted for filing. | |
| Please return all correspondence concerning this matter | er to the following: | |
| WILLIAM G SCHAEFER | \ | 7 |
| | (Name of Contact Pers | son) 河流 石山 |
| WILLIAM G SCHAEFER | R, ACCOUN | TANT |
| | (Firm/ Company) | |
| 1520 10TH AVE NORTH | 1 STE C | |
| | (Address) | |
| LAKE WORTH FL 33460 | 0-2069 | |
| | (City/ State and Zip Co | ode) |
| 16191@BELLSO | | |
| E-mail address: (to be used | I for future annual repo | rt notification) |
| For further information concerning this matter, please | call: | |
| WILLIAM G SCHAEFER | t at 561 | Code & Daytime Telephone Number) |
| (Name of Contact Person) | (Area | Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | ayable to the Florida De | epartment of State: |
| ■ \$35 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 Tallahassee, FL 32314 | Ame Divi Clift 2661 | et Address endment Section sion of Corporations on Building Executive Center Circle ahassee, FL 32301 |

Articles of Amendment to

Articles of Incorporation of LITTLE POND PARK RESIDENCES CONDOMINIUM ASSOCIATION INC.

| (Name of Corporation as currently filed with | h the Florida Dept. of Sta | <u>ate</u>) | |
|---|--|------------------------------|----------------------|
| 741528 | | | |
| (Document Num | iber of Corporation (if kno | wn) | |
| (Name of Corporation as currently filed with 741528 (Document Num Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation: | da Statutes, this <i>Florida N</i> | ot For Profit Corporation | adopts the following |
| A. If amending name, enter the new name of the c | corporation: | | Marine Britis |
| NA | <u>. </u> | | The new |
| name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name. | "corporation" or "incorpo | orated" or the abbreviatio | |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD | | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Be</u> | <u>ox</u>) NA | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered NA Name of New Registered Agent: | | rida, enter the name of | the |
| New Registered Office Address: | (Florida street addre | ess) | |
| | | , Florida | |
| | (City) | | (Zip Code) |
| New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. | | accept the obligations of th | he position. |
| | e of New Registered Agen | t, if changing | |

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 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 | $\overline{\underline{\mathbf{v}}}$ $\overline{\underline{\mathbf{M}}}$ | ohn Doe like Jones ally Smith | |
|----------------------------------|---|-------------------------------------|--|
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | <u>P</u> | LOUIS DESTEFANO | 4000 S OCEAN BLVD |
| Add X Remove | | | MANALAPAN, FLORIDA 33462 |
| 2) Change | <u>P</u> | MARY ANN KUNKLE | 8 LITTLE POND ROAD |
| X Add | | | MANALAPAN FL 33462 |
| Remove 3) Change | <u>V</u> | FLORENCE GORDON | 2 LITTLE POND ROAD MANALAPAN FL 33462 |
| X Add | | | WANALAI AN I L 33402 |
| 4) Change | <u>s</u> | ELAINE BRADY | 1377 LANDS END ROAD |
| X_Add | | | LANTANA FL 33462-4771 |
| Remove 5) X Change | <u>T</u> | WILLIAM QUIGLEY | 18 LITTLE POND ROAD MANALAPAN FL 33462 |
| Add | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) |
|--|---------------------------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | <u> </u> |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment | t(s) adoption: 03/18/15 | . if other than the |
|--|---|---------------------|
| date this document was signed | | |
| Effective date <u>if applicable</u> : | 04/20/15 | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/w was/were sufficient for ap | vere adopted by the members and the number of votes cast for the amendment(s) oproval. | |
| There are no members or adopted by the board of o | members entitled to vote on the amendment(s). The amendment(s) was/were directors. | |
| Dated 04/ | 20/15 | |
| Signature | mary ann Kunkle | |
| (By the | e chairman of vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) | |
| MARY | ANN KUNKLE | |
| | (Typed or printed name of person signing) | |
| PRESI | DENT | |
| | (Title of person signing) | |