742104

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	*
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF THE TALL AHASSEE FOR THE

Amendment Olo Pasignation

JUL 20 2016

D CUSHING

COVER LETTER

DIANE. Cushing ODOS. MYFOR reda. com

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: SUNRISE	ISLAND C	mul almodac	Assoc	I INC
DOCUMENT NUMBER: 742/04				
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matter	r to the following:			
Ulee MAJOR				
	(Name of Contact Person)		
SUNRISE ISLAND CONDO	MNUM AS (Firm/ Company) .	soc. II IN	<u> </u>	
3955 N. NOB HILL RO	•		-	
	(Address)		SEC ALL	<u> </u>
SUNRISE; FL.	33351 (City/ State and Zip Code		RETA	
	(City/ State and Zip Code	2)	50.7	o i ≥ [7]
Ulee Marion DaoL. Cu E-mail address: (to be used	om for future annual report t	notification)		H 9107
For further information concerning this matter, please	call:			
<u>Ulee MAJOR</u>		154) 394-596		
(Name of Contact Person)		ea Code) (Daytime Telep	none Numb	er)
Enclosed is a check for the following amount made pay	yable to the Florida Depa	rtinent of State:	•	
S35 Filing Fee S43.75 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		Address		
Amendment Section Division of Corporations		ment Section		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301



June 28, 2016

JOHN MARINACCIO - PRESIDENT SUNRISE ISLAND CONDOMINIUM ASSOC. II INC 3955 N NOB HILL ROAD SUNRISE, FL 33351

SUBJECT: SUNRISE ISLAND CONDOMINIUM ASSOCIATION II, INC.

Ref. Number: 742104

We have received your document for SUNRISE ISLAND CONDOMINIUM ASSOCIATION II, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must either complete a resignation application for each person resigning and pay \$35.00 for each one or you can complete the articles of amendment form and pay only \$35.00.

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.

Diane Cushing Senior Section Administrator

Letter Number: 416A00013587

Articles of Amendment to Articles of Incorporation

SUNRISE ISLAND CONDOMIN	ium Asso	C. T. TNC.	是 基 〇
(Name of Corporation as curre	ntly filed with the	Florida Dept. of State	
74210	u		
	ber of Corporation	(if known)	
	•	,	
fursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this <i>Florida Ne</i>	ot For Profit Corporatio	n adopts the following
A. If amending name, enter the new name of the corpora	tion:		
SAME AS A	ABOVE	·	The new
name must be distinguishable and contain the word "corport" "Company" or "Co," may not be used in the name.		rated" or the abbreviati	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		SAME AS I	pefore
			•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SUNRI	V NOB Hi se, fe 3 As Before	3351
. If amending the registered agent and/or registered off new registered agent and/or the new registered office		rida, enter the name of	the
Name of New Registered Agent:	ee M. M	AJOR	
<u> 395</u>		. ¥	08 Swelse, GC 33
New Registered Office Address:			
_ Sun	ORISE (City)		rida <u>3335.1</u> (ip Code)
Sew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for	i Agent: amiliar with and ac	cept the obligations of t	he position.
<u>u</u>	lee M	Mojor	
	Signature of New R	egistered Agent, if chan	ging

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		Doe Jones Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	Pres	ELISHA PEARSON	3955 N. NOB HILL Rd #501 SUNRISE, FL. 33351
Remove 2) Change Add	<u>Pres.</u>	John MARINACCIO	3955 N. NOB HILLRY #404 SUNRISE, FL 33351
Remove 3) Change Add Remove	<u>Vice</u> fres	Dennis I. Schor	3955 N. NOB H! II Rd #500 SUNRISE FL. 33351
4) Change Add Remove	Vice Pres.	Alex Zegara	3955 N. NOB HITTED #516 SUNRISE, FL 33351
5) Change Add Remove	<u>Sei</u>	SANDRAT. Schulze	3955 NINOBHILL ROL #511 SUPRISE, FL 33351
6) Change _✓ Add	Sec_	CHWISTER CZESTAW	3955 N. NOB Hill Rd #400 Sunrise, Fl. 33351
Remove		Page 2 of 4	

Executive Officer; CFO held. President, Treasur	= Chief Financial er, Director would	Officer. If an officer/director holds more that	in one title, list the first letter of each office
Changes should be note a change, Mike Jones le Mike Jones, V as Remov	aves the corporati	on, Sally Smith is named the ${\it V}$ and ${\it SThese}$ s.	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John I V Mike I SV Sally S	<u>lones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>birector</u>	Allen Abitbol	3955 N. NOB HILL Rd # 40 SUNRISE, FL. 33351
Change Add	<u>Drector</u>	Piero H. Bingham	3955 N NOB HITE Rd #401 SUNCISE, FL 33351
Remove Change Add	<u>Dicec</u> lop	Rafael RAMOS	3955 N. NOB H.IIRd #30 SUNRISE FL. 33351
Remove (A) Change	·	ı	
Remove	<u></u>		
Remove // Change Add			
Remove			

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

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief

address of each Officer and/or Director being added:

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

(Attach additional sheets, if necessary)

If amending or adding a	dditional Articles, enter change(s) if necessary). (Be specific)	<u>here</u> :		
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