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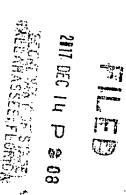
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### FILING CANCELLED RETURNED CHECK

12/14/17--01009--001 \*\*35.00



PEC 1.5 2017.



#### **COVER LETTER**

## FILING CANCELLED RETURNED CHECK

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Coller Gty/Pompano Beach Community Development Exporation, Inc
DOCUMENT NUMBER: 748384
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Addertey (Name of Contact Person)
Collier City Dompane Beach Community Devolopment Corporation Ine
3001 NW & Street
Pompano Beach, FC. 33069 (City/ State and Zip Code)
adderley ce phode by share. Com  E-mail alidress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tomes Mohorn at (954) 977-4024 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
Status Filing Fee & Status Certified Copy (Additional Copy is enclosed)  **Status**  **Certificate of Status**  **Certified Copy (Additional Copy is enclosed)  **Certified Copy (Additional Copy is enclosed)

#### **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed)

#### Articles of Amendment to Articles of Incorporation of

# FILING CANCELLED RETURNED CHECK

Collier City Pompens Bea	ch Commil	
(Name of Corporation as curi	rently filed with the Florida	Dept. of State)
<u>748384</u>		
(Document Nu	mber of Corporation (if know	(n)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not For Pr</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" o	r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Manag adaress <u>Man Beat Col City Col</u>		
	<del></del>	
		<del>_</del>
D. If amending the registered agent and/or registered o		er the name of the
new registered agent and/or the new registered offic	ee address:	
Name of New Registered Agent:		
	(Florida	a street address)
<u>New Registered Office Address:</u>		
	(Cin)	, Florida (Zip Code)
	(City)	(zip Code)
New Registered Agent's Signature, if changing Register	ed Agent:	Literation of the control
I hereby accept the appointment as registered agent. I am	gamitiar with and accept the	origations of the position.
		2
<del></del>	Signature of New Registered	d Agent, if changing
	<i>ω ν</i>	87 8
		MAC - A STATE OF THE STATE OF T
	Page 1 of 4	T T
		SA L FR

### 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		CANCELLED NED CHECK
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) <u>X</u> Change Add		James	Mohorn	Brypens Beach, FC 3306
Remove 2) Change Add				
Remove 3) Change Add				
Remove 4) Change Add				
Remove 5) Change Add				
Remove 6) Change Add				
Remove				

EIf amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Updating afficer title to President of organization (James Mohorn)				
FILING CANCELLED				
RETURNED CHECK				

## FILING CANCELLED RETURNED CHECK

ľh	e date of each amendment(s) adoption		_, if other than the
	e this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
٩d	option of Amendment(s)	(CHECK ONE)	
V	The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
	There are no members or members er adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
	Dated 1113	20/17	
	Signature Six Lie	Brench	
	(by the chairman of have not been selections)	r vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or ited fiduciary by that fiduciary)	
	JASY	Typed or printed name of person signing)	
		PISTURE DIRECTOR	

(Title of person signing)