## 764938

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	DOMINIUM ASSOCIATION, INC.
764938 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for tiling.
Please return all correspondence concerning this m	latter to the following:
Gary Vik	
	(Name of Contact Person)
PAR SIDE CONDOMINIUM ASSOCIATION, IN	₹C.
	(Firm/ Company)
1303 SW 16TH TERRACE #203	
	(Address)
CAPE CORAL, FL 33991	
	(City/ State and Zip Code)
GVIK55@AOL.COM	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
GARY VIK	630-373-409 <b>6</b>
(Name of Contact Pers	son) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
S35 Filing Fee	© ES43.75 Filing Fee & ES52.50 Filing Fee  IS Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

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## SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State) PAR SIDE CONDOMINIUM ASSOCIATION, INC. (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. 1303 SW 16TH TERRACE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) CAPE CORAL, FL 33991 C. Enter new mailing address, if applicable: 1303 SW 16TH TERRACE #203 (Mailing address MAY BE A POST OFFICE BOX) CAPE CORAL, FL 33991 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: LINDA BIRD Name of New Registered Agent: 1303 SW 16TH TERRACE #203 (Florida street address) New Registered Office Address: \_, Florida 33991 (Zip Code) CAPE CORAL New Registered Agent's Signature, if changing Registered Agent: Thereby 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:

F = 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	PT         John Do           V         Mike Jo           SV         Salty St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	KIM GILMAN	2220 SW 21ST STREET CAPE CORAL, FL 33991
× Remove			
2) × Change Add	Ъ	GARY VIK	1303 SW 16TH TERRACE #103 CAPE CORAL, FL 33991
X	<u>\$1D</u>	KATHRYN BERNIER	1303 SW 16TH TERRACE#102 CAPE CORAL, FL 33991
4) <u>× Change</u> Add	STD	LINDA BIRD	1303 SW 16TH TERRACE #203 CAPE CORAL, FL 33991
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption	M/Nomho-	9 7171		
The date of each amendment(s) adoption	: NUICHIUT	1, dUd1	, if	other than the
date this document was signed.				
Effective date if applicable:				
(	no more than 90 days after	amendment file date)		

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 11/14/2021
Signature Jary III
(By the 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)
GARY VIK
(Typed or printed name of person signing)
President
(Title of person signing)