764998

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amen & 7-10-09

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Cape (jarden	Condom	inium Assoc.
DOCUMENT NUMBER:	764998			
The enclosed Articles of Amendmen	at and fee are subn	nitted for filing.		
Please return all correspondence con	cerning this matte	r to the following	g:	
Mary	Lynn (Name of C	ostello Contact Person)	, e , e posser	
Capa (Garden (Firm/	Company)	Assoc.	
_ ५८५। ५	SW Santo	a Barbai ddress)	ra Pl=	# 6
Cape	(City/ State	F/ 3 and Zip Code)	33914	
L Cos7	TELLO S Idress: (to be used	for future annua	. Com I report notificati	on)
For further information concerning t	his matter, please	call:		
hynn Costello (Name of Contact Per	son)	at (443 (Area	<u>532</u> Code & Daytime	- 1256 e Telephone Number)
Enclosed is a check for the following	g amount made pa	yable to the Flori	ida Department o	of State:
\$35 Filing Fee \$43.75 F Certificate of		☐ \$43.75 Fili Certified Cop (Additional co enclosed)	у	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporati P.O. Box 6327	ons	Amen Divisi	Address dment Section on of Corporation n Building	ŕ

2661 Executive Center Circle Tallahassee, FL 32301

		2009 11 12 50
Articles of Ame	ndment	TAJECO B
to		AHAARY PHID
Articles of Incorp	poration	SEEDES
Cape Garden Condominic (Name of Corporation as currently filed with	h the Florida Dept. of	TASECRETARY OF PHIZ: 54 TASECRETARY OF STATE TO M. Inc State)
764998		
(Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute the following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation adopts
A. If amending name, enter the new name of the corporat	ion:	
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may n		2.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		J Santa Barbara Pl
	Cape Cor	al Fl 33914
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		enter the name of the
Name of New Registered Agent:		· ·····
New Registered Office Address: (Flo	orida street address)	
	/C:+ \	, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I amposition.		ccept the obligations of the

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)

<u>Title</u>	Name	Address	Type of Action
S <u>ec-</u>)vi.	Carolyn Iandoli	4641 SW Santa Barba Capa Caral	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
E. <u>If amendin</u>	ng or adding additional Articles, enter	change(s) here:	
(attach addi	itional sheets, if necessary). (Be specif	ic)	
<u> </u>		1-12-14-14-1-1-12-1-1-1-1-1-1-1-1-1-1-1-	
		100000000000000000000000000000000000000	
	<u>, , , , , , , , , , , , , , , , , , , </u>		
			

The date of each amendment(s) adoption: June 1, 2009
(1) (C. J. Attack to account of the
Effective date if applicable: June 1, 2009
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Signature Wary Coste (By the chairman of 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, of other court appointed fiduciary by that fiduciary) Mary Lynn Costello (Typed or printed name of person signing)
Treesurer - Director (Title of person signing)

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