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SECRETARY OF STATE

C. LEWIS

DEC 1 7 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	e 3	Æ		
NAME OF CORPORATION: Cape	Garden	Condominium	Assoc	
DOCUMENT NUMBER: 7649	98		 -	
The enclosed Articles of Amendment and fee are subr	nitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Patrick Warren				
	(Ivaille of Contact I ciso	n)		
Pres. Cape Garde	ins Condo			
- · · ·	(Firm/ Company)			
4641 Santa Barbo	ra P1 #:	5		
	(Address)			
Cape (ora) FI	33914			
	(City/ State and Zip Cod	e)		
PFW & tory E-mail address: (to be used	pon , me for future annual report	notification)		
For further information concerning this matter, please	call:			
Patrick Warren		777 4503		
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number	•)	
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:		
\$35 Filing Fee \$\text{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	Amendment Section Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

APPROVEL AND FILED

Articles of Amendment to Articles of Incorporation

13 DEC 11 AM 9: 28

E];;

•	Articles of theorporation	2000
, , , , , , , , , , , , , , , , , , , ,	of	TALLAHASSEE ESTAT
Cape Garden Concominio		
(Name of Corporation as currently filed with	the Florida Dept. of State)	
764	498	7.
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "contain or "Co." may not be used in the name.	orporation" or "incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	RESS) Cape Coral F	ta Barbara P1# 5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	Do Box 15 Cape Cora	1323 F1 33915
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	office address:	e name of the
	SW Santa Barbara F	1 45
New Registered Office Address:	•	
Cape	Cora , Fl	orida 33914
		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent. Thereby accept the appointment as registered agent.	Jam familiar with and accept the oblig	eations of the position.
Signature of	of New Registered Agent, 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change	P	Steven Ka	smandorea	4703 SW Santa Barbara P
Add Remove				# 15 Cape Coral F1 33914
2) Change	<u>P</u>	Patrick	Warren	4641 SW Santa Barbara Pl
Add		Mary L		Cape Coral Fl 33914 4641 SW Santu Barbara P
3) Change Add	T	pakyan Co	stello	4641 SW Santu Barbara P
X Remove				
4) Change Add	_S	Carolynta	ndoli	4641 SW Santa Barbara P
Remove				
5) Change	T	Patricia	Kawell	4703 SW Santa Barbara P
Add Remove				Cape Cora F1 33914
6) Change				
Add				
Remove		•	2 -6.4	

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)					
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	• ,		APPROVED AND the stee
	date of each amendment this document was signed.	s) adoption:	FILED
Effe	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	SECRETARY OF STATE TALLAHASSEL, FLORIDA
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	SAIDA
Ø	The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for th proval.	e amendment(s)
	There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendmen irectors.	it(s) was/were
	Dated	12-9-2013	
	Signature	chairman or vice chairman of the board, president or other office	aor if directors
		ot been selected, by an incorporator – if in the hands of a receiv	
		ourt appointed fiduciary by that fiduciary)	,
	P.	atrick Warren	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	