

76608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

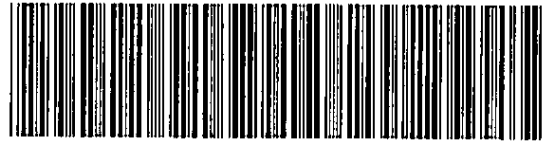
(Business Entity Name)

(Document Number)

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ALBRITTON

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2022 JAN 19 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ROYAL PALMS OF CORAL SPRINGS CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: 766088

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GONZALO GIL

(Name of Contact Person)

(Firm/ Company)

8680 NW 57 CT

(Address)

CORAL SPRINGS, FL 33067

(City/ State and Zip Code)

eduardo@infomart2000.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GONZALO GIL

(Name of Contact Person)

754-214-0431

at (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JAN 19 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FL

December 11, 2021

GONZALO GIL
8680 NW 57 CT
CORAL SPRINGS, FL 33067

SUBJECT: ROYAL PALMS OF CORAL SPRINGS CONDOMINIUM
ASSOCIATION, INC.
Ref. Number: 766088

We have received your document for ROYAL PALMS OF CORAL SPRINGS CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Non-Profit Corporation. Please complete and return the enclosed blank form(s).

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 321A00029860

Articles of Amendment
to
Articles of Incorporation
of

ROYAL PALMS OF CORAL SPRINGS CONDOMINIUM ASSOCIATION, LLC.

(Name of Corporation as currently filed with the Florida Dept. of State)

766088

(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:

The new 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.

B. Enter new principal office address, if applicable:

8680 NW 57 CT

(Principal office address MUST BE A STREET ADDRESS) Coral Springs, FL 33067

C. Enter new mailing address, if applicable:

8680 NW 57 Ct

(Mailing address MAY BE A POST OFFICE BOX)

Coral Springs, FL 33067

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:

Name of New Registered Agent: GONZALO GIL

8680 NW 57 CT

(Florida street address)

New Registered Office Address:

Coral Springs

(City)

Florida 33067

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Gonzalo Gil

Signature of New Registered Agent, if changing

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SECRETARY OF STATE
TALLAHASSEE, FL

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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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change <u> </u> Add	<u>PD</u>	<u>BIXLER, RONALD</u>	<u>535 Oaks Drive 202</u>
<u> </u> Remove			<u>Pompano Beach, FL 33069</u>
2) <u> </u> Change <u> </u> Add	<u>TD,SD</u>	<u>BIXLER, LASTENIA</u>	<u>535 Oaks Drive 502</u>
<u> </u> Remove			<u>Pompano Beach, FL 33069</u>
3) <u> </u> Change <u> </u> Add <u> </u> Remove	<u>PD</u>	<u>GIL, GONZALO</u>	<u>8680 NW 57 CT</u>
			<u>Coral Springs, FL 33067</u>
4) <u> </u> Change <u> </u> Add <u> </u> Remove			
5) <u> </u> Change <u> </u> Add <u> </u> Remove			
6) <u> </u> Change <u> </u> Add <u> </u> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

☒ 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.

Dated 11/15/2021

Signature Gonzalo Gil
(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)

Gonzalo Gil
(Typed or printed name of person signing)

President, Director
(Title of person signing)