

766177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

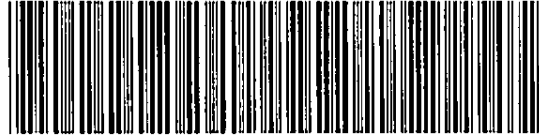
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Office Use Only



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2024 SEP 24 PM 1:36
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Pines of Oakland Forest Condominium Association INC.

DOCUMENT NUMBER: 766177

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

Please return all correspondence concerning this matter to the following:

John Deleon

(Name of Contact Person)

The Pines of Oakland Forest Condominium Association Inc.

(Firm/ Company)

2760 S. Oakland Forest Dr.

(Address)

Oakland Park, FL 33309

(City/ State and Zip Code)

pinesoflaklandforest@outlook.com

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

For further information concerning this matter, please call:

Stephen DiScalafani

(Name of Contact Person)

954

(Area Code)

982-0611

(Daytime Telephone Number)

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

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
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

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

Articles of Amendment
to
Articles of Incorporation
of

The Pines of Oakland Forest Condominium Association INC.

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

766177

(Document Number of Corporation (if known))

2024 SEP 24 PM 1:35

TALLAHASSEE

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:

(Principal office address MUST BE A STREET ADDRESS)

2760 S. Oakland Forest DR

Oakland Park, FL 33309

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2760 S. Oakland Forest Dr.

Oakland Park FL 33309

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:

Stephen DiSclafani

2760 S. Oakland Forest Dr.

(Florida street address)

New Registered Office Address:

Oakland Park

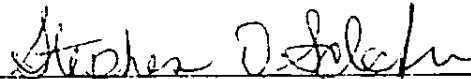
(City)

Florida 33309

(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.



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:

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> 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) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ST</u>	<u>John Delcon</u>	<u>2760 S. Oakland Forest Dr</u> <u>Oakland Park, FL 33309</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Rafal Szybowski</u>	<u>2760 S. Oakland Forest Dr</u> <u>Oakland Park, FL 33309</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Bill Barnish</u>	<u>2760 S. Oakland Forest Dr</u> <u>Oakland Park, FL 33309</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Trevor Speller</u>	<u>2760 S. Oakland Forest Dr</u> <u>Oakland Park, FL 33309</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Carmina Cerdan</u>	<u>2760 S. Oakland Forest Dr</u> <u>Oakland Park, FL 33309</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u>

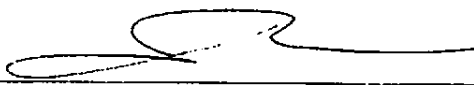
E. If amending or adding additional Articles, enter change(s) here:

(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 6/28/2024

Signature 
(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)

John DeLeon
(Typed or printed name of person signing)

Secretary / Treasurer
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2024

JOHN DELEON
2760 S. OAKLAND FOREST DR.
OAKLAND PARK, FL 33309

SUBJECT: THE PINES OF OAKLAND FOREST CONDOMINIUM
ASSOCIATION, INC.
Ref. Number: 766177

We have received your document for THE PINES OF OAKLAND FOREST CONDOMINIUM ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The registered agent must sign accepting the designation.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 224A00019359

