## 766196

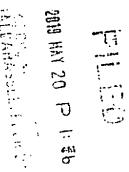
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Croissant Place Conc	dominium Association, I	NC.		
766 DOCUMENT NUMBER:	196			-	
The enclosed Articles of Amenda	ment and fee are subm	nitted for filing.			_
Please return all correspondence	concerning this matte	r to the following:			
Donald H. Benson					
		(Name of Contact Perso	n)		_
Croissant Place Condominium A	Association				
	<del> </del>	(Firm/ Company)			_
1301 South Andrews Ave Suite	302				
		(Address)			_
Fort Lauderdale, FL 33316					
	(	(City/ State and Zip Cod	le)		_
apost@fla-esq.com					
E-mai	l address: (to be used	for future annual report	notification	)	-
For further information concerning	ng this matter, please o	call:			
Angela Post		· · · · · · · · · · · · · · · · · · ·	54-462-4304 		
(Nar	me of Contact Person)	u. (A	rea Code)	(Daytime Telephone Number)	-
Enclosed is a check for the follow	ving amount made pay	able to the Florida Dep	artment of S	state:	
■ \$35 Filing Fee □	\$43.75 Filing Fee & [ Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing Addre	224	Stroot	Addross		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Croissant Place Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 2819 HAY 20 P 1: 66 766196 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida sireet address) New Registered Office Address: N/A . Florida (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, an 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>V</u> <u>Mil</u>	n <u>Doe</u> se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Elliot Borkson	1301 S Andrews Ave Suite 302
x Add			Fort Lauderdale, FL 33316
Remove			
2) Change	D	Bruce Greene	1301 S Andrews Ave Suite 302
X Add			Fort Lauderdale, FL 33316
Remove			<del></del>
3) Change	D	Ira Marcus	1301 S Andrews Ave Suite 302
X Add			Fort Lauderdale, FL 33316
Remove			
4) Change		<del> </del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del> </del>
Add			
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
<del></del>	
	<del></del>
	<del></del>
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) ad late this document was signed.	Option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	
There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated	15.19	
Signature	orald HBens	
(By the chair have not bee	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Parsichant	

(Title of person signing)