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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: TANDEM	CENTER	ON DOMINIU	n Office Ow	NEKS
DOCUMENT NUMBER: 766	,471			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following	,		
STEPHANIE TANCEY				
	(Name of Contac	t Person)		
TANDEM CENTER CONDO	MIN IV N (Firm Comp	OFFICE C)UNEXS	
333 TAMIAMI TRAIL				
	(Address)		7
VENICE, FC 34285				* 19 9 00 PC ATIONS
((City/ State and Z	lip Code)		ა
				# N
STANCEY @ MPS CONTRACTOR	CS NET	report potification)		——— ≥്
13 min dades a fee ne me	William William			ဟ ည
For further information concerning this matter, please	e call:			क
STEPHANIE TANCEY (Name of Contact Person		a 941	441-1441	
(Name of Contact Person	n)	(Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the following amount made p	ayable to the Flori	da Department of St	ate:	
\$35 Filing Fee		Certific vy 18 — Certific	ate of Status d Copy onal Copy is	
Mailing Address		Street Address		
Amendment Section		Amendment Sectio		
Division of Corporations		Division of Corpor	ations	

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TANDEM CENTER CONDOMINIUM	OFFICE OWNERS ASSOCIATION, INC
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
<u> 766 471</u>	
(Document Numb	es of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
allA	The new
name must be distinguishable and contain the word "corpora." "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
	
C. Enter new mailing address, if applicable:	1
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	
Name of New Registered Agent: GER 1	ARD NAPOLITANO
333	S. TAMIAMI TRAIL SUITE ZOS
	(Florida street address)
New Registered Office Address:	21.06
	ENICE , Florida 34285 (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position.
S	ignature 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:

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Evecutive Officer; \ CFO = Chief Financial Officer. If an officeralizector holds more than one title, list the first letter of each office hold. President, Treasurer, Director would be PTD.$

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: \underline{X} Change \underline{X} Remove \underline{X} Add		iohn Doe Mike Jones Sally Smith	
		<u>Addres</u> s	<u>Namc</u>	
	Add	_	MICHARL W MILLER	
Change	Add	SUITE ZOS	MARC PSMITH	
4) Change	Change Add	TANO 333 S TAMIAMITRA SUITE ZOS	GERARD NAPOLITANO	II TRAIL
5) Change	4) Change Add			
Add	Add			
61 Change	61 Change Add			

E If amending or adding additional Arti- (attach additional sheets, if necessary).	(Be specific)
	
•	

The	e date of each amendment(s) adoption:	if other than the
	e this document was signed.	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records	oc listed as the
Adı	option of Amendment(s) (<u>CHECK ONE</u>)	
Ø	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 $\frac{7-13-18}{1000}$	
	Signature AMM	_
	(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)	
	GERARD NAPOLITANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	