

770434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

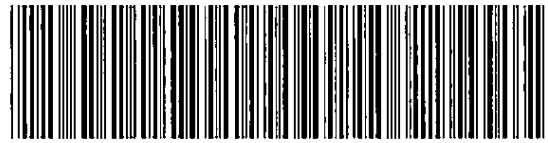
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Do not file Bylaws  
Received correction  
through email  
October 19, 2023  
Anissa Butler

Office Use Only



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05/16/23--01028--002 \*\*43.75

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2023 OCT 18 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE, FL

OCT 17 2023  
A. BUTLER

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** The Capri of Singer Island Condominium Association, Inc.

**DOCUMENT NUMBER:** # 770434 / Letter # 723A00017846

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

Please return all correspondence concerning this matter to the following:

Teresa Fredricks, LCAM Property Manager

(Name of Contact Person)

The Capri of Singer Island Condominium Association, Inc.

(Firm/ Company)

5250 N. Ocean Drive

(Address)

Singer Island, FL 33404

(City/ State and Zip Code)

capricondominium@gmail.com

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

For further information concerning this matter, please call:

Teresa Fredricks, LCAM

561

842-0293

at

(Name of Contact Person)

(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 &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

FILED

2023 OCT 18 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FL

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

\_\_\_\_\_  
(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:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**

*(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 street address)*

*New Registered Office Address:*

\_\_\_\_\_  
*(City)* 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.*

**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><br>(Check One)  | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|---|--------------|-------------|----------------|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove | _____        | _____       | _____          |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove | _____        | _____       | _____          |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove     | _____        | _____       | _____          |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove | _____        | _____       | _____          |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove | _____        | _____       | _____          |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove | _____        | _____       | _____          |

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

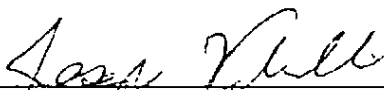
*(attach additional sheets, if necessary). (Be specific)*

SEE ATTACHED



- 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 April 12, 2023

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)

Joseph Vitulli

(Typed or printed name of person signing)

PRESIDENT

**FILED**

2023 OCT 18 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FL

**CORPORATE RESOLUTION / CERTIFICATE OF AMENDMENT**

**TO THE DECLARATION OF CONDOMINIUM OF THE CAPRI OF SINGER ISLAND CONDOMINIUM  
ASSOCIATION, INC., A FLORIDA CORPORATION NOT FOR PROFIT**

WHEREAS, THE Declaration of Condominium of the Capri of Singer Island, a Condominium has been duly recorded in the Public Records of Palm Beach County, Florida, in Official Records Book 4519, page 1164; and

WHEREAS, the By-laws of the Capri of Singer Island Condominium Association, Inc, are attached as exhibit thereto; and

WHEREAS, on February 21<sup>st</sup>, 2023, a duly called and noticed meeting of the membership of the Capri of Singer Island Condominium Association, Inc., was convened for the purpose of having the members vote on the passage of the proposed amendments to the Articles of Incorporation to the aforementioned Declaration, and proposed amendments to the aforementioned By-Laws.

WHEREAS, at the properly noticed meeting on February 21<sup>st</sup>, 2023, a quorum of the members was obtained, and the amendments to the aforementioned Articles of Incorporation that was proposed by the Board of Directors, a true and correct copy of which is attached hereto, was approved by at least sixty-six percent (66%) of the total votes of members, the required number of votes pursuant to the Declaration.

~~WHEREAS~~; at the properly noticed meeting on February 21<sup>st</sup>, 2023, a quorum of the members was obtained, and the amendments to the aforementioned By-Laws that were proposed by the Board of Directors, the amendments, true and correct copies of which are attached hereto, were approved by not less than sixty-six percent (66%) of the total available votes of the entire membership, the required number of votes as required pursuant to the By-Laws.

NOW THEREFORE, the undersigned hereby certify that the following amendments to the Articles of Incorporation and/or By-Laws, attached hereto, are a true and correct copy of the amendments to the Articles of Incorporation and/or By-Laws as approved and amended by the membership pursuant to said Declaration and By-Laws and Florida Statutes.

AMENDMENT to DECLARATION of THE CAPRI OF SINGER ISLAND

(Additions indicated by underlining; Deletions indicated by ~~striketrough~~)

13.5 LEASING OF UNITS. No owner may lease his/her unit until the owner has owned the unit for a minimum of three (3) years. Before any unit owner ~~other than Developer~~ may lease his/her unit, he/she must first obtain approval from the Board of Directors of the Association, such approval may not be unreasonably withheld. The process for obtaining approval shall involve the submitting of an application containing the terms and conditions of the proposed lease to the Board. The Board has the right if it so desires to interview the proposed tenant to determine whether that tenant would comply with this Declaration and other documents governing the property, perform background checks, credit checks, financial inspections which may involve requesting financial information, including but not limited to tax returns, bank statements and other financial records. Within fifteen (15) days of the date an application is submitted, the Board must either notify the owner of its acceptance or rejection of the proposed tenant or of its need for additional information. If the Board does not take any action within this time, the application will have deemed to have been approved. The transfer of a unit to a spouse, child or sibling shall not be deemed a transfer to a new owner for which the three (3) year minimum wait period applies. Short term rentals shall not be permitted. A rental term shall only be for one year. Only two (2) one year rentals are permitted within a five (5) year period.



WITNESS my signature hereto this 10 day of <sup>May</sup> April 2023, at Singer Island, Palm Beach County, Florida.

Signed, sealed and delivered  
In the presence of:

Teresa Frederick  
Teresa Frederick

Capri of Singer Island Condominium Association, Inc.

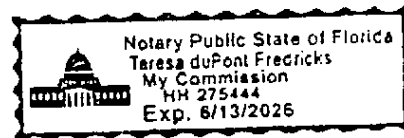
By: Joseph D. Vitulli  
Joseph D. Vitulli, President

By: Kathleen DiCocco  
Kathleen DiCocco, Secretary/Treasurer

STATE OF  
COUNTY OF


<sup>MAJ</sup>  
The foregoing instrument was acknowledged before me by means of physical presence this 10  
day of April, 2023 by JOSEPH D. VITULLI, the President, of the Capri of Singer Island Condominium  
Association, Inc., respectively, who is personally known to me or who has procured \_\_\_\_\_  
identification and who did take an oath and state he is the individual described in and who executed the  
foregoing for the purpose expressed.

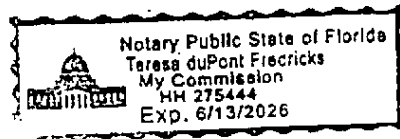
*Teresa duPont Fredricks*  
Notary Public



STATE OF FLORIDA  
COUNTY OF PALM BEACH

10<sup>th</sup> The foregoing instrument was acknowledged before me by means of physical presence this day of May, 202~~3~~ by KATHLEEN DICOCOCO, the Secretary/Treasurer, of the Capri of Singer Island Condominium Association, Inc., respectively, who is personally known to me or who has procured \_\_\_\_\_ identification and who did take an oath and state she is the individual described in and who executed the foregoing for the purpose expressed.

  
Notary Public





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2023

JOSEPH VITULLI  
5250 NORTH OCEAN DR.  
8S  
SINGER ISLAND, FL 33404

SUBJECT: THE CAPRI OF SINGER ISLAND CONDOMINIUM ASSOCIATION,  
INC.  
Ref. Number: 770434

We have received your document for THE CAPRI OF SINGER ISLAND  
CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75.  
However, the enclosed document has not been filed and is being returned for the  
following correction(s):

Bylaws are not filed with this office. Please retain them for your records.

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: 723A00017846

*Emailed 10/18/23*

*Anissa • Butler @ dos.myflorida.com*

*www.sunbiz.org*