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(((H24000189358 3)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN CONDOMINIUM MANAGEMENT GROUP, INC.

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May 31, 2024

FLORIDA DEPARTMENT OF STATE

CONDOMINIUM MANAGEMENT GROUP, INC.

AROL 122ND AVENUE NORTH

4801 122ND AVENUE NORTH CLEARWATER, FL 33762US

SUBJECT: CONDOMINIUM MANAGEMENT GROUP, INC.

REF: L05793

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list the registered agent's name as it is registered in our office. It should be PLLC not PLLLC.

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.

Diane Cushing Operations Manager A FAX Aud. #: H24000189358 Letter Number: 524A00011900 To:

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Articles of Amendment to Articles of Incorporation of

CONDOMINIUM MANAGEMENT G	ROUP, INC.			
(Name	of Corporation as currently	filed with the Florida Dept. of Sta		
L05793			— -	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this F	lorida Profit Corporation adopts th	e following amendment(s	
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp." "Inc." or "Co". A	ompany," or "incorporated" or the c professional corporation name m	ubbreviation "Corp.," ust contain the word	
B. Enter new principal office address,		4801 122ND AVENUE NORTH	2024 J	
(Principal office address MUST BE A ST		CLEARWATER, FL 33762	77.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4801 122ND AVENUE NORTH	M 9:0	
		CLEARWATER, FL 33762	ယ	
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent		ess in Florida, enter the name of th	<u>ne</u>	
<u>Mane of New Registered Agent</u>	150 2nd Ave. N., Suite 1770			
	(Florida stre			
New Registered Office Address:	St. Petersburg		Florida 33701	
New Negatives Office Manages.	(1	City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist Wi			position.	
Check if applicable The amendment(s) is/are being filed p	oursuant to s. 607,0120 (11) (c	e), F.S.		

Example:

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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:

To:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CE() = Chief Executive Officer; CF() = 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.

A Change	<u>17-1.</u>	<u>John 1766</u>	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	Michael Slavin	7800 66th Street N., Suite 205
Add			Pinellas Park, FL 33781
X Remove	170	Tavia I. Iaaliaan	7000 CCTH CTDCTT \ , */06
2) Change	VP	Tonie J. Jackson	7800 66TH STREET N. #205
Add			Pinellas Park, FL 33781
X Remove 3) Change	P	Laura Eastman	4801 122ND AVENUE NOR
x Add			CLEARWATER. FL 33762
Remove			
4) Change		_	
Add			<u> </u>
Remove			· ω
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

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If amonding or adding additional An	sialan austra abaaaaaa	1124000103330
If amending or adding additional Ar (Attach additional sheets, if necessary).	(Be specific)	
		
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If an amandment provides for an area	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the am	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		-

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The date of each amendment(s) adoption:	han the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
May 28, 2024 Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Laura Eastman (Typed or printed name of person signing) President (Title of person signing)	n J