N0000005484

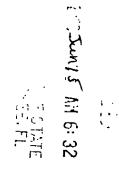
(Reque	estor's Name)	
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PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)	
(Docur	nent Number)	
Certified Copies	Certificates of S	Status
Special Instructions to Filin	ng Officer:	

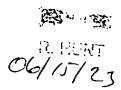
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

Golden Lakes C NAME OF CORPORATION:	Ondominium Asso	ociation, Ir	nc		
N00000005484 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are st	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following	g:			
Rachel Fernandez					
	(Name of Contac	et Person)			
Golden Lakes Condonimium					
	(Firm/ Comp	nany)			
473 Golden Isles Drive					
	(Address	s)			
Hallandale Beach, FL 33009					
	(City/ State and 2	Zip Code)			
rrfernandez@comcast.net					
E-mail address: (to be us	sed for future annua	l report no	tification	1)	
For further information concerning this matter, plea	ase call:				
Rachel Fernandez		786		357-5629	
(Name of Contact Pers	son)		Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Flor	ida Depart	ment of	State:	
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu		,	Certif.	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address		Street Ac		ion	

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

Golden Lakes Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N00000005484 (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: 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:

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.

(City)

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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	Manny Silva	473 Golden Isles Dr. apt 202 Hallandale Beach, FL 33009
2) Change Add	Р	Alex Pintel	473 Golden Isles Dr. apt 301 Hallandale Beach, FL 33009
Remove 3) Change Add Remove	<u>v</u>	Gregory Słowkowski	473 Golden Isles Dr. apt 201 Hallagdale Beach, FL 33009
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			-

•				
-				
				
				
		-		
				
				
The date of each amendment(s) add date this document was signed.	option:			, if other than the
Effective date if applicable:				
	(no more than 90 a	days after amendment fi	le date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the app partment of State's record	licable statutory filing r ds.	requirements, this date will i	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Ö	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 _	August 21, 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)				
		Rachel Fernandez			
		(Typed or printed name of person signing)			
		TS			
		(Title of person signing)			