## NOO 000006716

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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Commercial Condominium Association
N0000006716 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Catherine Faerber	
(Na	ne of Contact Person)
RE 1 Advisor, LLC	
	(Firm/ Company)
1164 Goodlette Road	
	(Address)
Naples, FL 34102	
(Cit	y/ State and Zip Code)
Catherine@RE1Advisor.com	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call:	
Catherine Faerber	239-280-0733
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payabl	e to the Florida Department of State:
( <i>i</i>	43.75 Filing Fee & S52.50 Filing Fee ertified Copy Gertificate of Status Additional copy is nclosed) (Additional Copy is Enclosed)
Mailing Address 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

Veterans Park Commons Commercial Condominium Asse	ociation	
(Name of Corporation as cur	rently filed with the Florid	a Dept. of State)
N00000006716		
(Document Nu	mber of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corportion or "Co." may not be used in the name.	oration" or "incorporated"	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u> )	
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		19 J
(Mailing data ess MAT DE AT OUT OTTTOE BOX)		
	<del></del>	<del></del>
		: - <u>- i</u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered officered.		nter the name of the
Name of New Registered Agent:		<u></u>
<u>New Registered Office Address:</u>	(Flor	ida street address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		ne obligations of the position.
	Signature of New Register	red Agent, if changing
	Dags 1 of 1	

address of each Offic (Attach additional she Please note the officer P = President; V = Vid	er and/or Directors, if necessary) Adirector title by the President; T= T O = Chief Finance	r being added: ne first letter of the office title: reasurer; S= Secretary; D= D al Officer. If an officer/direct	irector: TR= Trustee; C = Chairman or Clerk; CEO = Chief or holds more than one title, list the first letter of each office
	leaves the corpora	tion, Sally Smith is named the	e is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change.
Example: X Change X Remove A Add	<u>V</u> <u>Mik</u>	Doe : Jones : Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change	<u>D</u>	Sara Brown	1855 Veterans Park Drive Suite 303
			Naples, FL 34109

1855 Veterans Park Drive Suite 303
Naples, FL 34109
1855 Veterans Park Drive Suite 103
Naples, Fl 34109
1855 Veterans Park Drive Suite 301
Naples, FL 34109
1855 Veterans Park Drive Suite 203
NAPLES, FL 34109
1865 Veterans Park Drive Suite 301
Naples, FL 34109
1865 Veterans Park Dr Suite 304
Naples, FL 34109
]

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
ADD	D	Ed Clarke	1845 Veterans Park Dr. Naples, FL 34109			
ADD	D	James Nici	1865 Veterans Park Dr., Suite 203 Naples, FL 34109			
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The date of each amedate this document was	May 14, 2019 idment(s) adoption: signed.	, if other than the
Effective date if appli	immediately	
	(no more than 90 days after amendment file date	ý
Note: If the date insert document's effective de	ed in this block does not meet the applicable statutory filing requirer the on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendm	ent(s) ( <u>CHECK ONE</u> )	
The amendment(s was/were sufficier	was/were adopted by the members and the number of votes east for approval.	the amendment(s)
There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendinard of directors.	nent(s) was/were
Dated	6/12/19	
Signature	· · · · · · · · · · · · · · · · · · ·	<del>.</del>
	(By the chairman or vice chairman of the board, president or other of have not been selected, by an incorporator—if in the hands of a recother court appointed fiduciary by that fiduciary)	
	Catherine Faerber	
	(Typed or printed name of person signin	g)
	Association Manager	
	(Titic of person signing)	