N00000008512

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	<u>,</u>
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

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14 MAY -8 AH 9: 19
SECRETARY OF STATE
SECRETARY OF STATE

AND FILED Y -8 AM 9: 19

C. LEWIS May 21 2014 EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2014

LAURA SA / SEMINOLE TRIBE OF FLORIDA 6300 STIRLING RD HOLLYWOOD, FL 33024 US

SUBJECT: COMMERCE PARK OF COCONUT CREEK PRIVATE ROAD

ASSOCIATION, INC.

Ref. Number: N00000008512

We have received your document for COMMERCE PARK OF COCONUT CREEK PRIVATE ROAD ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 814A00008198

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Commerce Park	of	Coconut	Creek	Private	Road	Association	Inc
DOCUMENT NUMBER: N00000008512					_		
The enclosed Articles of Amendment and fee are su	bmit	ted for filing	g.				
Please return all correspondence concerning this ma	ter t	o the follow	/ing:				
Laura Sa							
	(1)	lame of Cor	ntact Pers	son)			
Seminole Tribe of Florida				•			
		(Firm/ Co	ompany)	- '	_	· · · · · · · · · · · · · · · · · · ·	
6300 Stirling Road							
		(Add	ress)				
Hollywood FL 30024							
	(C	City/ State ar	nd Zip Co	ode)			
lsa@semtribe.com E-mailaddress: (to be us	t	in fishing one	wal reno	rt notificati	201		
E-man address: (to be ds	pa re	or tuture am	iuai repo	it nonnean	J11)		
For further information concerning this matter, please	e ca	11:					
Laura Sa		at (_	954	966	-630	0 x11271	
(Name of Contact Person)			(Area	Code & Da	ytime '	Telephone Numb	er)
Enclosed is a check for the following amount made	paya	ble to the F	lorida De	epartment of	f State:		
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	3	\$43.75 Fili: Certified C (Additional enclosed)	ору	Cert Cert (Add	ified C	of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Ame Divi Clift	et Address endment Sec sion of Corp on Building	ction poration	•	

Tallahassee, FL 32301



14 MAY -8 AH 9: 19

SECRETARY OF STATE TALL AHASSET, PLORIDA

Articles of Amendment to Articles of Incorporation of

Commerce Park of Coconut	: Creek P:	rivate F	Road	Associat	ion Inc	
(Name of Corporation as currently fi	led with the Flo	rida Dept. of	State)			
N00000008512						
(Docume	nt Number of Co	orporation (if)	(nown)	•		
Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:		s, this <i>Florida</i>	Not Fo	or Profit Corpo	ration adopts the fo	llowing
A. If amending name, enter the new name	of the corporati	ion:				
						The new
name must be distinguishable and contain the	word "corporat	tion" or "inco	rporate	d" or the abbre	viation "Corp." or	"Inc."
'Company" or "Co." may not be used in the	<u>name</u> .					
B. Enter new principal office address, if ap						
Principal office address <u>MUST BE A STRE</u>	<u>ET ADDRESS</u>)					
•				-		
				•••		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF						
(Mailing address MAI BE A FOST OFF	ICE BUX)					
			<u> </u>			
D. If amending the registered agent and/or	· registered offic	re address in	Elorida	enter the nan	re of the	
new registered agent and/or the new re-			1 101 1411	CIIICI IIICI	ic or the	
Name of New Registered Agent:						
_		(Florida street ac	ddress)	,.		
New Registered Office Address:						
				, Florida		
	(City)		(Zip Code)			
New Registered Agent's Signature, if chang	ging Registered	Agent:				
hereby accept the appointment as registered	agent. I am far	miliar with an	d accept	the obligation	s of the position.	
Si	ignature of New.	Registered Ag	ent, if c	hanging		

Page 1 of 4

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	<u>V</u> <u>M</u> i	nn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Marcellus W. Osceola Jr	6300 Stirling Rd
Add			Hollywood FL 33024
X Remove			
2) Change	D	Christopher Osceola	6300 Stirling Rd
X Add			Hollywood FL 33024
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

E. If amending or adding additions (attach additional sheets, if necess	al Articles, enter cha ary). (Be specific)	ange(s) here:	
,			
		· · · · · · · · · · · · · · · · · · ·	
·			
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	·	-	•
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	e date of each amendment(s) adoption: April 4, 201414 MAY -8 AH 9: 19 e this document was signed. SEURETARY OF STATE TALL AHASSEL FORIO (no more than 90 days after amendment file date)	, if other than the
Ado	option of Amendment(s) (CHECK ONE)	
X	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 5-9-14 Signature VIII	
-	(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)	
	James E. Billie	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	