NO0999

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gardens on the Bay (Owners Association, I	nc.	
N00999 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
Georg	ge S. Savage, Esq.		
	(Name of Contact Per	rson)	
The Sav	age Law Group, P.A.		
	(Firm/ Company))	
8603 S.	Dixie Highway, Suite	218	
	(Address)		
	Miami, Florida 33143	3	
	(City/ State and Zip C	Code)	
	office@savagelaw.n	et	
E-mail address: (to be used	for future annual repo	ort notification)
For further information concerning this matter, please	call:		
George S. Savage	at	305	577-0000
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida D	epartment of S	itate:
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)
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



Gardens on the Bay Owners Association, Inc.

15 NOV -9 AM 10: 43

	N00999		
(Docum	nent Number of Co	rporation (if known)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this F	lorida Not For Profit	t Corporation adopts the following
A. If amending name, enter the new name of the	corporation:		
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		"incorporated" or th	
B. Enter new principal office address, if applical	N/A		
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX) N/A		
D. If amending the registered agent and/or registered agent and/or the new registered		ss in Florida, enter t	he name of the
	N/A		
Name of New Registered Agent:			
	N/A		
New Registered Office Address:	(Florida street address)		
New Megistered Office rudyess.	N/A		. N/A
	(City)	<u> </u>	, Florida (Zip Code)
	(City)	·	(Lip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agen		ith and accept the obl	igations of the position.
_	· · · · · · · · · · · · · · · · · · ·		
	Signature	of New Registered As	gent, 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	<u>V</u> <u>M</u> :	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Pedro Vilorio	
Add X Remove			
2) Change	PD	Julie M. Gonzalez	6484 Indian Creek Dr.
X Add Remove			Miami Beach, FL 33141
3) Change	VD	Marta Alvarez	
Add X Remove			
4) Change	VD	Mari Fernandez	6484 Indian Creek Dr.
X Add Remove			Miami Beach, FL 33141
5) X Change	ASD	Enrique Perez	
Add			
6) X Change	TD	Eduardo Migueltorena	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
ADD SD Luis Pereira 6484 Indian Creel Dr., Miami Beach, FL 33141			
N .			

TL.	data of each amondment(s) ada	July 10, 2015	F. H. St. 18 mah mah mah mah	
	date of each amendment(s) ado this document was signed,	риоп;	$\frac{FH}{DIVi}$, if other than the	
Effective date if applicable:		July 10, 2015	· · · · · · · · · · · · · · · · · · ·	
		(no more than 90 days after amendment file date)	15 HOV -9 AM 10: 44	
	e: If the date inserted in this block ument's effective date on the Department.	k does not meet the applicable statutory filing requirement artment of State's records.	s, this date will not be listed as the	
Adoption of Amendment(s)		(CHECK ONE)		
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the	amendment(s)	
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 November 4	, 2013		
	Signature			
	have not been	an or vice chairman of the board, president or other office selected, by an incorporator — if in the hands of a receive pointed fiduciary by that fiduciary)		
	George S	. Savage		
		(Typed or printed name of person signing)		
	Attorney	lauthorized Person		
		(Title of person signing)		