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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Pine 6	lidge Cl.	ub I	Condominium	Association,	Inc.
document number: <u>N</u>	0200	<u>, 0000 (</u>	9461		·	

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

į,

Frank Paul Barber E Chi Hd Contact Person Firm/ Company <u>448 Palm Springs Drive, Suite 137</u> Altamonte Springs FL 32701 City/ State and Zip Code <u>Fpb 498 @ a mail. com</u> E-mail address: (to boused for future annual report notification)

For further information concerning this matter, please call:

Frank Paul Barbe Name of Contact Person

at (<u>407</u>) <u>Z60 - 6050</u> Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation	
Pine Ridge Club II Condomin (Name of Corporation as currently filed with the Fle # NOZOD 2009461	ium Association, Inc.
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not I</i> amendment(s) to its Articles of Incorporation:	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
NIA	The new Trace
NIA name must be distinguishable and contain the word "corporation" or "incorporat "Company" or "Co." may not be used in the name.	ed" or the abbreviation "Corp." or "http://www.
B. <u>Enter new principal office address, if applicable:</u> <u>N/A</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) <u><u>H</u><u> </u><u>A</u></u>	
D. <u>If amending the registered agent and/or registered office address in Florid</u> <u>new registered agent and/or the new registered office address:</u> <u>Name of New Registered Agent</u> :N_A	a, enter the name of the
<u>New Registered Office Address;</u>	(Florida street address)
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept	<i>pt the obligations of the position.</i>

· ·

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)

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John f</u> <u>V</u> <u>Mike</u> SV Sally S	lones	
<u>Type of Action</u> (Check One)	<u>_Title</u>	Name	Address
I) Change	?	Bob D. Clut Felter	498 Palm Springd Dr.
Add Remove			Altemente Springd, FJ 32761
2) X Change	7	Peter Campomoned	498 Pulm Springer Dr
Add Remove 3.) Change	57_	Wilfredo Nieved	Altemark Spingel, 7-2 32701 498 Rulm Spingel Dr
Add Remove			Site 168 Altemante SpingA, FJ 32761
4) Change X Add	<u> </u>	Zora: da Osor: o	<u>498 Palm Springf</u> Dr <u>S. 10 180</u>
Remove		EDIC SUCH SKI	Alternerte Spiny1, 21 32761
5) Change Add	_5	Sylvia Zery Eric Sugaski	448 Palm Springs Pr Juite 160
Remove		0	Alteriale Springs, FJ 32701
6) Change Add	<u>VP</u>	Jacqueline Sugasik.	498 Palm Spings Dr. Suite 160
Remove	Dinna	GANTUCCI	Altomonth Spinys, FJ 32761 SAME AS Above

E.	If amending (or adding	additional Arti	cles, enter change(s) here:	
	(attach udditio	nal sheets	, if necessary).	(Be specific)	

. • _NA ___. _____ _____ _____ -----------····· -----_____ _____ _____ ____ ____ -----------

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The date of each amendment(s) adoption:			, if other than the
date this document was signed.	1		
	Hugast	7018	
(*	io moresthan 90 days	s 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 as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

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

Ø There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

26.18 31 August. Dated h 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)

Peter James Campomanes (Typed or primied name of person signing)

President OF Pine Ridge Club II (Till) of person signing)