## M03000000430

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SECRETARY OF STATE
TALL MANAGESE, FI

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	nerce Center Condominium Association, Inc.
N03000000430	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Katherin Khidirian	
-	(Name of Contact Person)
H&B Commercial Management Co.	
	(Firm/ Company)
601 N. Congress Ave. Suite 428	
	(Address)
Delray Beach, Fl. 33445	
	(City/ State and Zip Code)
info@homeandbusinesspartners.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Katherin Khidirian	561 279-9251
(Name of Contact Per	
Enclosed is a check for the following amount mac	le payable to the Florida Department of State:
☐ \$35 Filing Fee	& □\$43.75 Filing Fee & □\$52.50 Filing Fee  aus Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Street Address

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

Name of Corporation as currently filed with the Florida D	Dept. of State)	
Congress Commerce Center Condominium Association. Inc.	Document# N03000000430	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporati	ion:	
	The new	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	)	
	<u>ග</u> පු	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TALL	
(statung dadress MAT BE A FOST OFFICE BOX)		T
		דד
D. If amending the registered agent and/or registered offic	ce address in Florida, enter the name of the	7
new registered agent and/or the new registered office ad		_
Name of New Registered Agent:	10 <b>N</b>	
1000 411	(Florida street address)	
New Registered Office Address:		
	. Florida	
	renty (zip code)	
New Registered Agent's Signature, if changing Registered .  I hereby accept the appointment as registered agent. I am fan	Agent: miliar with and account the abligations of the position	
петсоу ассерстве арронитен аз гезімегей адет. Тат зап	mmar with and accept the obligations of the position.	
Sig	ignature 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 D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Trevor Patching	601 N. Congress Ave. Suite 428 Delray Beach, FL 33445
2) Change Add	<u>P</u>	Gino Vargas	601 N. Congress Ave. Suite 428 Delray Beach, FL 33445
Remove 3 ) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	

· uSign Envelope ID: 780C0AC9-152B-44E	3-8E71-277A5A9A421F	
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	· · · · · · · · · · · · · · · · · · ·	
The date of each amendment(s) addate this document was signed.	August 1st, 2021	, if other than
Δ.1181	uet let 2021	
Effective date if applicable:	ust 1st, 2021 (no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this da	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approxi	dopted by the members and the number of votes east for the amendm	ient(s)

## DocuSign Envelope ID: 780C0AC9-152B-44E3-8E71-277A5A9A421F

Dated	
Signatu	Docusigned by:  Katherin H. Khidirian  TO 133449942195420
·	(By the charman? of the board, product or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Katherin Khidirian
	(Typed or printed name of person signing)

(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were