# ND300005133

(Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>&gt;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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10 OCT 29 AM ID: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend 10 10 10 10

#### **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

NAME OF CODPOR	ATION: \/: ll.s	of Timbert Par	Condonici
NAME OF CORTOR	Allow. VIII S	of Timberlia Parc	sociation
DOCUMENT NUMB	ER: N 03000	00 5133	
The enclosed Articles of	of Amendment and fee are sub	mitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
Ma	(Name of	Contact Person)	
Firs	+ Coast Assac	(Company)	ut cc
115	ST Cantrel Po	Address)	<u> </u>
V c	closons, le , E (City/ Stat	し J2.z と y e and Zip Code)	
	E-mail address: (10 be used	tst coast an . Lum I for future annual report notificati	on)
For further information	concerning this matter, please	call:	
(Name o	f Contact Person)	at ( <u>904</u> ) <u>998</u> (Area Code & Daytime	S 3.65 Telephone Number)
Enclosed is a check for	the following amount made pa	ayable to the Florida Department o	f State:
₩\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend	g Address ment Section n of Corporations ox 6327	Street Address Amendment Section Division of Corporations Clifton Building	,

2661 Executive Center Circle Tallahassee, FL 32301



## RECEIVED 10 OCT 29 AM 10:30

SECHETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2010

CINDY MUNERA, CAM FIRST COAST ASSOCIATION MANAGEMENT 11555 CENTRAL PARKWAY - SUITE 801 JACKSONVILLE, FL 32224

SUBJECT: VILLAS OF TIMBERLIN PARC CONDOMINIUM ASSOCIATION,

INC.

Ref. Number: N03000005133

We have received your document for VILLAS OF TIMBERLIN PARC CONDOMINIUM 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.

AN OFFICER OF THE CORPORATION MUST SIGN THE DOCUMENT ALONG WITH THE NAME AND TITLE TYPED/PRINTED BELOW THE SIGNATURE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 110A00024658

OCT 2 2 2010

### **Articles of Amendment** to **Articles of Incorporation**

(Name of Corporation as currently filed	with the Florida Dept. of S	State)
N 03 00000 5 133		
(Document Number of Co	orporation (if known)	
ursuant to the provisions of section 617.1006, Florida S te following amendment(s) to its Articles of Incorporation		Profit Corporation adopts
. If amending name, enter the new name of the corp	oration:	
he new name must be distinguishable and contain the bbreviation "Corp." or "Inc." "Company" or "Co." n		ncorporated" or the
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDR</u>	<u></u>	6
		10 pcT 29
	1981	29
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		곡
maria de la companya		A 0; 0!
		T 29 AM 10: 01
If amending the registered agent and/or registered	office address in Florida, e	enter the name of the
new registered agent and/or the new registered off	ice address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	<u>.</u>
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Regist	ered Agent:	
nereby accept the appointment as registered agent.  sition.		cept the obligations of the
<u> </u>		
Signature e	of New Registered Agent, if c	hanging

### 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)

<u>Title</u>	Name	Address	Type of Action
VL_	Songer, Carrie	Jacksonville F1	☐ Add ☐ Remove
VP_	Crooms, Latersha	Jacksonville, FC 32224	☐ Add ☐ Remove Change Hille
Se C	Carlosimo, Michelle	11555 Central Plan- Tactuonville, Fr 3222+	Add Remove Change Kitle
	ng or adding additional Articles, enter litional sheets, if necessary). (Be specif		
			•
			· ·

The date of each amendment(	adoption: العام ا
	(date of adoption is required)
Effective date <u>if applicable</u> :	19/4/10
	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.
	approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	st for the amendment(s) was/were sufficient for approval
by	ooting group)
	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	October 4, 2010
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)