N03000005522

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| Compute park | | | | |
| | | | | |





400315302034

07/03/18--01017--021 **43.75

SEUNCIARY DE STATE
SEUNCIARY DE STATE
SEUNCIARY DE STATE

Sund

AUG 0 3 2018

D CUSHING

COVER LETTER

TO:

Amendment Section **Division of Corporations**

La Colonnade Condominium Association Inc. SUBJECT: Name of Corporation

DOCUMENT NUMBER:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

La Colonnade Condominium Association Inc.

Firm/Company

1323 Highway A1A

Satellite Beach, FL.

City/State and Zip Code

lacolonnade321@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Long

Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

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



July 10, 2018

LA COLONNADE CONDOMINIUM ASSOCIATION INC. 1323 HIGHWAY A1A SATELLITE BEACH, FL

SUBJECT: LA COLONNADE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N03000005522

We have received your document for LA COLONNADE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete page 4 in its entirety.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 118A00014155

Articles of Amendment to Articles of Incorporation of

La Colonnade Condominium Association Inc.

| "Company" or "Co." may not be used in the name. | The new |
|---|-------------------|
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: In amending name, enter the new name of the corporation: In amending name, enter the new name of the corporation: In amending name, enter the new name of the corporation: In amending name, enter the new name of the corporation: In a section of the corporation or "incorporated" or the abbreviation of "Company" or "Co." may not be used in the name. | The new |
| A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name. | The new |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name. B. Enter new principal office address if applicable: | |
| "Company" or "Co." may not be used in the name. | "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | |
| | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | <u> </u> |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | EK. |
| | (a m |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: | ıe |
| Name of New Registered Agent: Robert Henry | |
| 1323 Highway A1A unit 601 | |
| (Florida street address) New Registered Office Address: | |
| Satellite Beach . Florid | 32937 la |
| (City) (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 the obligations of the 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)

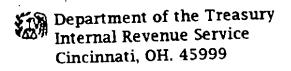
Please note the officer/director title by the first letter of the office title:

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>Doe</u> Jones <u>Smith</u> | |
|----------------------------------|--------------|-------------------------------------|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | Presiden, t. | Daniel Akins | 1323 Highway A1A unit 302 |
| Add | | | Satellite Beach, FL. 32937 |
| x Remove | | | |
| 2) Change | Presiden † | Robert Henry | 1323 Highway A1A unit601 |
| x Add | | | Satellite Beach, FL. 32937 |
| Remove | | | |
| 3) Change | <u> </u> | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | |
|---|---------------|---------------------------------------|--|--|
| (allach additional sheets, if necessary). | (Be specific) | 10/11 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | *** | · · · · · · · · · · · · · · · · · · · | | |
| | | | | |
| | | | | |



In reply refer to: Jun 20, 2018 0233276109 LTR 147C

20-5638313

LA COLONNADE CONDOMINIUM ASSOCIATION INC 1323 HIGHWAY A1A SATELLITE BCH FL 32937-2489 526

Taxpayer Identification Number: 20-5638313

Form(s):

Dear Taxpayer:

Thank you for your telephone inquiry of June 20th. 2018.

Your Employer Identification Number (EIN) is 20-5638313. Please keep this letter in your permanent records. Enter your name and your EIN on all business federal tax forms and on related correspondence.

If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 7:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely,

\s\ Mr. Taylor 10007772888 Customer Service Representative