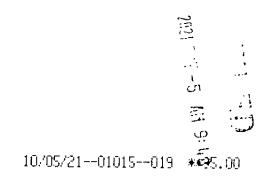
## N04000000

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	<del>= #)</del>
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Eiling Officer:	<del></del>
Special instructions to t	i lillig Officer.	

Office Use Only



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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Sunpointe Springs	Condominium .	Association In	
	<del></del>		
		-	
	-		Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature	- 1000		Fictitious Owner Search
J			Vehicle Search
	· <del></del>		Driving Record
Requested by:			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
1441110	Date	THIIC	UCC 11 Retrieval
Walk-In		p	Courier

## Articles of Amendment to Articles of Incorporation of

	Articles of Amendment	_
	to Articles of Incorporation	
	of	- C
SUNPOINTE SPRINGS CONDOMINIUM ASSO	OCIATION INC.	
(Name of Corporation as currently filed with th	e Florida Dept. of State)	in
N0400000155		
(Docur	ment Number of Corporation (if kn	nown)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	able: ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )	
D. If amending the registered agent and/or regines new registered agent and/or the new register		enter the name of the
Name of New Registered Agent:	LAW OFFICES OF SCOTT A F	RANK, PA
	3201 W COMMERCIAL BOUL	·
New Registered Office Address:	•	orida street address)
	FORT LAUDERDALE	33309
•	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing l I hereby accept the appointment as registered agen	Registered Agent:	
<del>-</del>	Signature of New Registe	red 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 De           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	Title	Name	<u>Addreş</u> s
1) Change Add	<u>P</u>	YONASON GREENWALD	3050 BISCAYNE BLVD SUITE 503
Remove			MIAMI, FL 33137
2) Change Add	<u>T</u>	ALEX SILBER	3050 BISCAYNE BLVD SUITE 503
Remove 3 ) Change	<u>S</u>	LISA BIRNIE	MIAMI, FL 33137 3050 BISCAYNE BLVD SUITE 503 MIAMI, FL 33137
4) Change Add	<u>P</u>	MICHAEL GORDON	
<ul> <li>X Remove</li> <li>5) Change Add</li> </ul>	<u>T</u>	KYLIE JACOBS	
<ul> <li>X Remove</li> <li>6) Change Add</li> </ul>	<u>S</u>	REBECCA PEREZ	
E. If amending or addir (attach additional shee	eg additional Arti	cles, enter change(s) here: (Re specific)	

	<del></del>	
		<del></del>
		<del>-</del>
		<u> </u>
		-3-11-
		<del></del>
	<u></u>	
The date of each amendment(s) adoption: date this document was signed.	10/01/2021	, if other than the
Effective date if applicable:		
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be tof State's records.	oe listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

adopted by the	
Date	10/4/2021
Date	O.L.
Sign	ature
	(By the chairman or vice chairman of the board, president or other officer-if directors
	have not been selected, by an incorporate – if in the hands of a receiver, trustee, or other court appointed fiduciary by the fiduciary)
	other court appointed fiduciary by the fiduciary)
	other court appointed fiduciary by the fiduciary) YONASON GREENWALD