N0400004012

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORFORATIONS
ON STATE
OF CORFORATIONS

Amend, 15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: OLD WINTER GARDEN R	OAD COMMERCE CENTER, A C	CONDOMINIUM ASSOCIATION, INC.		
DOCUMENT NUMBER: NO400004012	2			
The enclosed Articles of Amendment and fee are sub				
Please return all correspondence concerning this matter	er to the following:			
Bruce C. Myrick				
	Name of Contact Person			
OLD WINTER GARDEN ROAD C	OLD WINTER GARDEN ROAD COMMERCE CENTER, A CONDOMINIUM ASSOCIATION, INC.			
	Firm/ Company			
PO Box 616278	• •			
	Address			
Orlando, FL 3286	Orlando, FL 32861			
	City/ State and Zip Code	e		
bruce@ordev.com				
E-mail address: (to be use	d for future annual report	notification)		
For further information concerning this matter, please	call:			
Bruce Myrick				
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:		
■ \$35 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)		
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			



March 13, 2015

BRUCE C. MYRICK OLD WINTER GARDEN ROAD COMMERCE CENTER P.O. BOX 616278 ORLANDO, FL 32861

SUBJECT: OLD WINTER GARDEN ROAD COMMERCE CENTER, A CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N04000004012

We have received your document for OLD WINTER GARDEN ROAD COMMERCE CENTER, A 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.

We are enclosing the proper form(s) with instructions for your convenience.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite 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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 215A00005123

Articles of Amendment to Articles of Incorporation of

	2015 APR TARYED AND STATE
	2015 APR - I AND PARTED
!	- AH 9:45

Old Winter (arden R	Commerce Center, A Condominium Association, Inc.	:
(Name of	Corporat	on as currently filed with the Florida Dept. of State)	
N04000004	012		:
		(Document Number of Corporation (if known)	1
Duranant to the	aroulgions.	of goation 612 1006 Clouide Statutes this Elevide New For the 64 Company day adopt	j d. Gallania
		of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts of Incorporation:	the following
			1
A. II Rulending	name, en	ter the new name of the corporation:	
_ 		N/A	The new
		ble and contain the word "corporation" or "incorporated" or the abbreviation "Cor not be used in the name.	p." or "Inc "
B. <u>Enter new p</u> Principal office	rincipal d	ffice address, if applicable: N/A MUST BE A STREET ADDRESS)	
1 rancipus byjici		TOTAL DOTTO THE PROPERTY OF TH	_i
	1		
		dress, if applicable:	i i
(Mailing ad	dress MA	Y BE A POST OFFICE BOX) N/A	
			į
	:		
			-
D. If amending	the regist	tered agent and/or registered office address in Florida, enter the name of the	
new registe	red agent	and/or the new registered office address:	İ
Nome	CMm., D	gistered Agent: N/A	
<u>суцте с</u>	I IVEW KEP	estered Agent.	;
			1
New I	Registered	(Florida street address) Office Address:	
<u> </u>		N/A	;
		, riorida	
		(City) (Zip (.ode)
		Signature, if changing Registered Agent: ntment as registered agent. I am familiar with and accept the obligations of the posit.	!
г негеоу иссерг	ιτιε α <i>μρ</i> υπ		<i>Urt.</i>
		N/A	1
1		Signature of New Registered Agent, if changing	
j	i l		1

Page 1 of 4

If amending the Office address of each Office			director being removed and title, name, and
(Attach additional she		being added.	
Please note the office.	r/director title by the	first letter of the office title:	į
			istee; C = Chairman or Clerk; CEO = Chief
held. President, Treas		Officer. If an officer/director holds more the	an one litte, list the first letter of each office
Changes should be no	ited in the following i	nanner. Currently John Doe is listed as the .	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Mike Jones, V as Rem			nomu be noted as John Dae, 11 as a Change,
Example:			
X Change	PT John D		<u> </u>
X Remove	V Mike J		
X Add	SV Sally S	<u>muth</u>	;
Type of Action	<u>Title</u>	Name	<u>Addres</u> s
(Check One)			
1) Change	D	Bruce C. Myrick	7749 Minnie Rouse Lane
Add			Orlando, FL 32835
X Remove	}		
			! •
2) Change			
Add			
Remove			
3) Change			
Add	1		
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4) Change			
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5) Change	<u> </u>		
Add	1		<u> </u>
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6)Change			
Add			:
Remove		Page 2 of 4	
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•			
E. <u>If amendi</u> (attach add	ng or adding litional sheets	additional Articles, enter change(s) here: , if necessary). (Be specific)	
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The date of each amendment(s) adoption: 3/20/2015 date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date)	, if other than the
Adoption of Amendment(s) (CHECK ONE)	:
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	1
Dated 3/20/15 Signature Clon Johnson	; ;
(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)	
Alan Palmieri	i
(Typed or printed name of person signing)	† 1
President-Board of Directors	1
(Title of person signing)	; ! !