(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Dr	ocument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	





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07/06/15--01042--021 \*\*35.00





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Greenway Profess	ional Center Condominium	Association, Inc.
DOCUMENT NUME	N05000002270		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Charles F. Posess		
		Name of Contact Person	1
	•	Firm/ Company	
	4455 Military Trail Ste 102		
		Address	
	Jupiter, FL 33458	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		City/ State and Zip Cod	e
nicolo	@patchreeftitle.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Charles F. Posess		at (	296-6200
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation

licies	o,	111601	ho,
		Λſ	

Greenway Pro	Corporation as currently	y filed with the Florida Dept. of Sta	ium Association
_		, mea with may to have beginning	,
10020	(Document Number o	Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts th	e following amendment(s) to
If amending name, enter the new na	me of the corporation:		
			The new
ome must be distinguishable and com Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corporation no	or the abbreviation
Enter new principal office address,	if applicable:	4455 Military Trail Suite 102	
Principal office address MUST BE A S		Jupiter, FL 33458	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4455 Military Trail Suite 102	
		Jupiter, FL 33458	
. If amending the registered agent an new registered agent and/or the new			<u>e</u>
Name of New Registered Agent	Charles F. Posess		
	4455 Military Trail Suite	02	
	(Florida str	eet address)	
New Registered Office Address:	Jupiter	, Florid	a
		(City)	(Zip Code)
ew Registered Agent's Signature, if cl hereby accept the appointment as regist			Фäsition.
, , , , , , , , , , , , , , , , , , , ,	Charles &	530DA	
	Signature of New F	legistered Agent, if changing	-6 AH

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Adam Linkhorst	4495 Military Trail
Add			Suite 106
X Remove			Jupiter, FL 33458
2) Change	P	Charles F. Posess	4455 Military Trail
X Add			Suite 102
Remove			Jupiter, FL 33458
3 ) Change			
Remove			
4) Change			
Add			
Remove			`
5) Change			
Remove			
6) Change			
Add			
Remove			

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	•

The date of each amendment(s) a	doption:	, it other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this da epartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	s)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<b>,"</b>	
•	(voting group)	
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholde	er
☐ The amendment(s) was/were acceptation was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated 7	15	
Signature	harles Roses	
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 cournted fiduciary by that fiduciary)	1
	Charles F. Posess	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	