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(Req	uestor's Name))
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COVER LETTER

TO: Amendment Section Division of Corporations

3435 ENTERPRIS NAME OF CORPORATION:	SE CONDOMINIUM ASSOCIATION, INC
N05000006464 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Michael Siegert	
	(Name of Contact Person)
3435 ENTERPRISE CONDOMINIUM ASSOCIA	TION, INC
	(Firm/ Company)
3435 Enterprise Ave #41	
	(Address)
Naples, FL 34104	
	(City/ State and Zip Code)
3435enterprisecondoassocinc@gmail.com	
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Michael Siegert	239 6436636 at
(Name of Contact Person	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

3435 ENTERPRISE CONDOMINIUM ASSOCIATION, INC

(Name of Corporation as currently filed with the Florida	
3435 ENTERPRISE CONDOMINIUM ASSOCIATION, I	
(Document Nun	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the follow
A. If amending name, enter the new name of the corporation	ation:
	The n
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc
B. Enter new principal office address, if applicable:	3435 Enterprise Ave #41
(Principal office address MUST BE A STREET ADDRES.	Naples, FL 34104
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3435 Enterprise Ave #41
	Naples, FL 34104
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered office	: address:
Name of New Registered Agent:	e address:
	r
New Registered Office Address:	(Florida street address)
New Registered Office Address.	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J	
	Signature of New Registered Agent, if changing

<u>.</u>2

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 Do V Mike Jo SV Sally Sr	<u>mes</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	D	Matt Bolen	3435 Enterprise Ave #19 Naples, FL 34104
x Remove			
2) Change Add	<u>D</u>	Weslie Kunkle	716 Belville Blvd Naples, FL 34104
Remove 3) * Change Add Remove	P	Michael Siegert	3435 Enterprise Ave #38 Naples, FL 34104
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet	g additional Artic is, if necessary).	cles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adoption:	h
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	_
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
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.	

Dated	June 20,2023
Signatur	c AMI
-	(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)
	Michael Siegert
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.