N05000008768

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9/23/14

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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: S.C.O. Cond	ominium Association, Inc.
DOCUMENT NUMBER: NØ5 ØØØØØ 8 7 68	<u> </u>
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following	ng:
Greg Reynolds (Name of Conta	act Person)
(Firm/ Con	npany)
100 8 T 1 No. 810 205	
100 S. Esla Dr. Ste 205	ss)
Orlando, FL 32801 (City/ State and	
grea. (eynolls à fresi Email address: (to be used for future annu	Lential.com al report notification)
For further information concerning this matter, please call:	
Grea Reynolds at (2) (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flo	rida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Certificate of Status Certified Cop (Additional cenclosed)	certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Pallabassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

FILED.

& C.D. Condon	in ium-	Association	2014 SEP 22	PM 12: 45
(Name of Corporation as currently	iled with the Flo	rida Dept. of State)	SESTETARY	OF STATE
N0500000871	0		ŢĀĻLĀŅASSĒ	
		orporation (if known)	10	. **
·	•	•		<u>.</u>
Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation		s, this <i>Florida Not For Pro</i>	<i>ofit Corporation</i> ad	opts the following
amendment(s) to its Articles of meorporation	<u>.</u>			
A. If amending name, enter the new name	of the corporati	ion:		
NIA				The new
name must be distinguishable and contain th		tion" or "incorporated" or	the abbreviation "	Corp." or "Inc."
"Company" or "Co." may not be used in th	<u>e name</u> .	A		
B. Enter new principal office address, if a	pplicable:	/\///		
(Principal office address <u>MUST BE A STR</u>	<u>EET ADDRESS</u>)			
				
				
C. Enter new mailing address, if applical		AIIA		
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	10/17		
•				
D. If amending the registered agent and/o			er the name of the	
new registered agent and/or the new r	egistered office a	aaress:		
Name of New Registered Agent:	N/A			
	•			
		(Florida street address)		
New Registered Office Address:				
_			_, Florida	
	(City)		(2	Zip Code)
New Registered Agent's Signature, if char				
I hereby accept the appointment as registere	ed agent. I am fai	miliar with and accept the o	obligations of the p	osition.
	Signature of New	Registered Agent, if change	ing	

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 I V Mike . SV Sally S	Jones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	VT	Theodore Maines	100 S. Eola Dr. Suite 506 Orlando, FL 32801
2) Change Add		Daniel Humphress	100 S. Eda Dr. Suite 1503
Remove 3) Change Add		<u> </u>	Orlando, FL 3280
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)					
NIA					
• •					
•					
•					

The date of each amendment(s) adoption: 29 July 2014 date this document was sighed.	, if other than the
Effective date if applicable: 29 July 2014 (no more than 90 days after almendment file date)	
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.	
Dated 18 September 2014	
Signature	
(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)	
Khaled Akkawi	
(Typed or printed name of person signing)	
Yresiden+	
(Title of person signing)	