N050000010134

(Re	questor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	MAIT	MAIL	
(Bu	usiness Entity Name	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



000302012300

09/03/17--01012--011 **43.75

FILED

SECREPART STATE

Amendicus

AUG 23 2017
I ALBRITTON

COVER LETTER

Association Inc

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Royal Pal	m Business Plaza Condominium	
DOCUMENT NUMBER: NOSOX		
The enclosed Articles of Amendment and fee are submitt	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
Bruce L. Elkind		
(%)	ame of Contact Person)	
Formily & Cosmes	4c Dentistry	
9100 Belvedere Rd.	Suite 208	
	(Address)	
Royal Palm Beach	1, FL. 33411	
(Ci	ty/ State and Zip Code)	
SK8rdoc@muc.com E-mail address: (to be used for	1	
E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, please call	l:	
Bruce L. Elkind	at <u>561 - 798 - 4077</u> (Area Code) (Daytime Telephone Number)	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payab	ole to the Florida Department of State:	
(S43.75 Filing Fee & S52.50 Filing Fee 'ertified Copy Certificate of Status Additional copy is enclosed) (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2017

BRUCE L. ELKIND FAMILY & COSMETIC DENTISTRY 9100 BELVEDERE ROAD - STE. 208 ROYAL PALM BEACH, FL 33411

SUBJECT: ROYAL PALM BUSINESS PLAZA CONDOMINIUM ASSOCIATION,

INC.

Ref. Number: N05000010134

We have received your document for ROYAL PALM BUSINESS PLAZA CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type/print clearly so that the document is legible and acceptable for imaging.

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

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.

াrene Albatton ংনিegulation Specialist II

Letter Number: 717A00016070

Manss 版文的 17 Aus 25 Man 71

Articles of Amendment

Articles of Incorporation of

Royal Palm Business Plaza Condominium Association, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
NOS000010134
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp" or "Inc" "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: 9100 Belvedere Rd
(Principal office address MUST BE A STREET ADDRESS) Suite 208
(Principal office address MUST BE A STREET ADDRESS) Suite 208 Royal Palm Beach, FL 33411
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 9100 Belvedere Rd
<u>Suite</u> 208
Royal Palm Beach, FL 33411
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Bruce L. Elkind
9100 Belvedere Rd; Svite 208
New Revistored Office Address:
Royal Palm Beach Florida 33411 (City) (City)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
(Invelled
Signature of New Registered Agent, if changing
Page 1 of 4

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	lones	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	P	Joseph Walsh, Sr.	9250 Belvedere Ad Suite 101
_X Remove	D	Barr Culad	Royal Palm Beach, FL. 33411
21 Change Add		Bruce Elkind	9:00 Belvedere Rd Suite 208
Remove 3) Change	<u></u>	William Zheng	Royal Pulm Beach, F-L. 3341, 9200 Belvedere Ad Svite 110
_K_Add		ť	Royal Palm Beach, FL3341
4) Change Add	<u>T</u>	Gloria Jingru Guo	9200 Belvedere Pd Svite 103
Remove	r	- 11 1 1	Royal Palm Berd, FL3341
5) Change Add		Tom Whidden	9200 Belveder Rd Suite 114
Remove			Royal Palm Berd, FL 33411
6) Change			
Add			
Remove			<u> </u>

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
	Left	Blank	m	Purpose
				V
				·
	-			
·				
				· · · · · · · · · · · · · · · · · · ·
			•	
	,			
			<u> </u>	
				
				944
1//				
		· · · · · · · · · · · · · · · · · · ·		
		-		

The date of each amendment(s) ad date this document was signed.	option: Aug 17, 2017	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo- locument's effective date on the Dep	ck does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east for t	he amendment(s)
There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendmers.	nt(s) was/were
Dated 8-1	7-17	
Signature	well -	
(By the chair have not bee	man or vice chairman of the board, president or other off n selected, by an incorporator — if in the hands of a recei ppointed fiduciary by that fiduciary)	
<u>. </u>	Bruce Elkind	
	(Typed or printed name of person signing)
	President	
	(Title of person signing)	