

NO50000010153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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Amended

05/09/14--01012--019 \*\*35.00

FILED  
2014 JUN -3 PM 4:30  
TALLAHASSEE, FLORIDA

OR

X00789, 01169, 00707, 5/21/14  
00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 21, 2014

Grant A. Beardsley, Esq.  
Beardsley & Galvin, PL  
390 N. Orange Ave., Suite 2300  
Orlando, FL 32801

SUBJECT: THE PALMS HOTEL AND VILLAS II CONDOMINIUM  
ASSOCIATION, INC.  
Ref. Number: N05000010153

We have received your document for THE PALMS HOTEL AND VILLAS II 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.

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.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 414A00011018

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2014

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: The Palms Hotel and Villas II Condominium Association, Inc.

DOCUMENT NUMBER: NO 5000010153

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Grant A. Beardsley, Esq.

(Name of Contact Person)

Beardsley & Galvin, PC

(Firm/ Company)

390 N. Orange Avenue, Suite 2300

(Address)

Orlando, FL 32801

(City/ State and Zip Code)

gab @ beardsley galvin . com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Grant Beardsley

(Name of Contact Person)

at ( 321 )

445- 9933

(Area Code & Daytime Telephone Number)

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

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

↓  
Already Provided  
and cashed

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

The Palms Hotel and Villas II Condominium Association, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

2014 JUN -3 PM 4:30

FLORIDA  
TALLAHASSEE, FLORIDA

N05000010153

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

*The new 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:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

\_\_\_\_\_, Florida  
(City)

(Zip Code)

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.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

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:

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>D</u>	<u>Jose Ponce</u>	<u>3104 Parkway Blvd</u>
<input type="checkbox"/> Add			<u>Kissimmee, FL 34747</u>
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	<u>V</u>	<u>Jue Wang</u>	<u>3104 Parkway Blvd</u>
<input type="checkbox"/> Add			<u>Kissimmee, FL 34747</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change		<u>Eric Ouyang</u>	
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change		<u>Michael Peng</u>	
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change		<u>John Schmidt</u>	
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>P</u>	<u>Ricardo Quintero</u>	<u>3104 Parkway Blvd</u>
<input checked="" type="checkbox"/> Add			<u>Kissimmee, FL 34747</u>
<input type="checkbox"/> Remove			

**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      V      Mike Jones

X Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>S &amp; T</u>	<u>Teresita Anez</u>	<u>3104 Parkway Blvd</u>
<input checked="" type="checkbox"/> Add			<u>Kissimmee, FL 34747</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Luis Tost</u>	<u>3104 Parkway Blvd</u>
<input checked="" type="checkbox"/> Add			<u>Kissimmee, FL 34747</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: 5-1-2014  
(no more than 90 days after amendment 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: 05/01/2014 \_\_\_\_\_  
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)

Ricardo Quintero  
(Typed or printed name of person signing)  
President  
(Title of person signing)