(Requestor's Name)	
(Address) (Address)	000322184480
(City/State/Zip/Phone #)	
(Business Entity Name)	01/11/1901007024 **35.00
(Document Number)	
ertified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	H 2: 20

COVER LETTER

COVERLETTER	
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Orange Drive Professional Building Cund DOCUMENT NUMBER: N&5000000000000000000000000000000000000	Association
DOCUMENT NUMBER: $N a 5 q q q q q 5 q 1$	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lawrence Moster	
(Name of Contact Person)	
(Firm/ Company)	
5700 North Sterling Kands Drive	
Davie, FL 33314	
5700 North Sterling Ranch Drive (Address) Davie, FL 33314 (City/ State and Zip Code) Lawrence. Master @ Master And Company PA. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
aurence Moster 954 864-1117	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
Image: Construct of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of Status Image: Certificate of S	
Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32301	

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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 17, 2019

LAWRENCE MASTER 5700 NORTH STERLING RANCH DRIVE DAVIE, FL 33314

SUBJECT: ORANGE DRIVE PROFESSIONAL BUILDING CONDOMINIUM ASSOCIATION, INC. Ref. Number: N05000010591

We have received your document for ORANGE DRIVE PROFESSIONAL BUILDING 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.

Of you have any questions concerning the filing of your document, please call 4(850) 245-6050.

λĽ. Irene Albritton Regulatory Specialist II <u>:1</u> ۲

Letter Number: 519A00001416

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www.sunbiz.org

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

	Articles of Amendment
	to Articles of Incorporation
	Orange Drive Professional Building Condominion Associa
	Orange Drive Protessional Building Undominion Associa (Name of Corporation as currently filed with the Florida Dept. of State)
	$\frac{1}{10000000000000000000000000000000000$
	(Document Number of Corporation (if known)
	uant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following adoment(s) to its Articles of Incorporation:
а. <u>I</u>	f amending name, enter the new name of the corporation:
	The new
	e must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp " or "Inc." mpany" or "Co." may not be used in the name.
в. <u>н</u>	inter new principal office address, if applicable:
(Prin	ncipal office address MUST BE ASTREET ADDRESS)
C.	Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX
	f 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:
	New Registered Office Address:
	, Florida
	(City) (Zip Code)
<u>New</u> 1 her	Registered Agent's Signature, if changing Registered Agent: reby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
	Signature of New Registered Agen, 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PTJohn DoeVMike JonesSVSally Smith			
Type of Action (Check One)	<u>Title Name</u>		<u>Addres</u> s	
1) Change	Treasure 1	Master, Erina	5595 ORange Drive	#207
Add			Davie, FL SSS14	
2) Change	VP secretary	Master, Lawrence	5595 Oland	Drive#207
Add Remove	' 2		Pavie IL 33	54
3) Change				
Add				
4) Change				
Add Remove				
<i>5)</i> Change		<u>.</u>		
Add Remove				
б) Change	<u> </u>			
Add				
Remove		Page 2 of 4		

(attach addition	adding additional Articles, enter change(s) here: il sheets, if necessary). (Be specific)	
	<u>N_/_ `V </u>	
	/V	
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Page 3 of 4

The date of each amendment(s) adoption: $(2 - 19 - 20/8)$, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
<u>Note:</u> 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.
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 2-9-2018
Signature
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Laurene Masterz
(Typed or printed name of person signing)
V
(Title of person signing)

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