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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

LEGACY GRAND I	EAST GATE CONDO	MINIUM AS	SOCIATION, INC.
N06000001455 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
	MARINA GRIECO		
	(Name of Contact Pe	rson)	
Υ	IBER SERVICES LL	С	
	(Firm/ Company	)	
2434 HOL	LYWOOD BLVD, 2	ND FLOOR	
	(Address)		
HOL	LYWOOD, FL 33020		
	(City/ State and Zip (	Code)	
MARINA@TIBERSERVICES.COM			/
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
MARINA GRIECO	at _	954	7444051
(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida D	epartment of	State:
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)	Certif Certif (Addi Enclo	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section	Street Address Amendment Section		ion
Division of Corporations	Division of Corporations		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## FILED

## Articles of Amendment to Articles of Incorporation of

LEGACY GRAND EAST GATE CONDOMINIUM ASSO	CIATION, INC.		
(Name of Corporation as curre	ntly filed with the Florid	da Dept. of State)	
N06000001455			
(Document Num	ber of Corporation (if kno	own)	
Pursuant to the provisions of section 617.1006, Florida Statuanendment(s) to its Articles of Incorporation:	es, this Florida Not For	Profit Corporation add	opts the followin
A. If amending name, enter the new name of the corpora	tion:		
N/A			The nev
name must be distinguishable and contain the word "corport" ("Company" or "Co." may not be used in the name.	ition" or "incorporated"	or the abbreviation "C	Corp." or "Inc."
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>	,		<u> </u>
			, , , , , , , , , , , , , , , , , , ,
		<del> </del>	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
in the second se			-
			ع رد <u>-</u>
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		enter the name of the	
Name of New Registered Agent:	WBEH SAH-	TURIAN	
243	4 Hollywood	Blud. 2nd	F100r
New Registered Office Address:			
<u> </u>	ollywood	, Florida _ (Zip Co	<u> </u>
	(Chy)	(Zip Co	ode)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	amiliar with and accept 1		osition.
	/ Lain	hum	
	Signature of New Registe	red 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: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	V	JOSE MARIA SOFTA	2434 Hollywood Blvd 2nd Floor
Add			Hollywood, FL 33020
X Remove			
2) Change		<del> </del>	
Add			
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del> </del>	<del> </del>
Add			
Remove			<del> </del>
6) Change			
Add	<del></del>		
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
<del></del>	
·	
	<del></del>

	10/30/2018	
The date of each amer		, if other than the
date this document was	signed.	
	10/30/2018	
Effective date if appli-		<del></del>
	(no more than 90 days after amendment file date)	
	ted in this block does not meet the applicable statutory filing requirements, this date will no ate on the Department of State's records.	t be listed as the
Adoption of Amendm	ent(s) ( <u>CHECK ONE</u> )	
The amendment(s was/were sufficier	) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
Dated	10/30/2018	
Signature		
	(By the chairman of 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)	
	RUBEN SANTURIAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	