NOUDDODZZUI

	(Requestor's Name)	
	(Address)	
	(Address)	
	(Address)	
•	(City/State/Zip/Phone #)	
· PICK-UI	P WAIT	MAIL
	(Business Entity Name)	,,, ,, ,,,,,,,
	(Document Number)	
Certified Copies	Certificates of Statu	us
Special Instructions	s to Filing Officer:	

Office Use Only



700237659887

07/20/12--01020--007 **35.00

TO AUG -3 PM 4: 18

And 3/12

COVER LETTER

TO: Amendment Section Division of Corporations

DENCES CON	DOMINIUM ASSOCIATION, INC.
or filing.	
following:	
of Contact Person	1)
_C	
rm/ Company)	
(Address)	
tate and Zip Code	e)
ıl.com	
re annual report i	notification)
_{at} 954	846-7800 Delde & Daytime Telephone Number)
(Area Co	ode & Daytime Telephone Number)
the Florida Depa	rtment of State:
fied Copy itional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Amend Divisio	Address ment Section n of Corporations Building
	or filing. following: of Contact Person C rm/ Company) (Address) (Address) Al. COM are annual report in the Florida Department of Copy it it it is a copy is osed) Street Amend Divisio

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2012

RAANAN PERSKY, ESQ. EL-AD NATIONAL PROPERTIED LLC 1000 S. PINE ISLAND RD PLANTATION, FL 33324

SUBJECT: THE COLONNADE RESIDENCES CONDOMINIUM ASSOCIATION,

INC.

Ref. Number: N06000002261

We have received your document for THE COLONNADE RESIDENCES 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.

The date of adoption of each amendment must be included in the document.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 212A00019282

Articles of Amendment to Articles of Incorporation of

THE COLONNADE RESIDENCES CONDOMINIUM ASSOCIATION, INC.

(Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: In amending name, enter the new name of the corporation or "incorporated" or the abbreviation "Corp." of "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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the 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." of "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)	
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." of "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)	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." of "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)	following
*Company" or "Co." may not be used in the name. 3. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
"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)	The new
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	r "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(mailing dauress MAT BE A POST OFFICE BOX)	70 E
	12 MC - 3 PH 4: 18
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:	PH 4: 18
Name of New Registered Agent:	
(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.	

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	V Mik	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	RAMI ROSEN	1000 S. PINE ISLAND ROAD , SUITE # 450
Add			PLANTATION FL 33324
X Remove			
2) Change	PSD	OREN HON	1000 S. PINE ISLAND ROAD , SUITE # 450
X Add			PLANTATION FL 33324
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
18 301110 13 1	

The date of each amendment(s) adoption: June 15, 2012				
Effe	ctive date if applicable:			
	(no more than 90 days after amendment file date)			
Ado	ption 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 July 30, 2012			
	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)			
	Joseph Manor			
	(Typed or printed name of person signing)			
	DIRECTOR			
	(Title of person signing)			