

# NDL0000002439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2015 OCT 27 AM 10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend / cc*

OCT 28 2015

ALBRITTON

Date: 10/27/2015

Account #: I20000000088

Name: Michelle Walker

Reference #: T001652

ENTITY NAME: 1350 N. OCEAN BLVD. CONDOMINIUM ASSOCIATION, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Annual Report

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other: CERTIFIED COPY

Authorized Amount: \$43.75

Signature: Michelle Walker

Articles of Amendment  
to  
Articles of Incorporation  
of

1350 N. OCEAN BLVD. CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

1350 N. OCEAN BLVD. 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 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)

One Lakeshore Center

Bridgewater, MA 02324

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

One Lakeshore Center

Bridgewater, MA 02324

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:

National Corporate Research, Ltd., Inc.

115 North Calhoun Street, Suite 4

(Florida street address)

New Registered Office Address:

Tallahassee

(City)

Florida 32301

(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.*

*Michelle Walker, Asst. Secretary*  
Signature of New Registered Agent, if changing

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PD</u>	<u>Abbot G. Apter</u>	<u>202 W Superior St., Suite 321</u>
<input type="checkbox"/> Add			<u>Duluth, MN 55802</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VD</u>	<u>Karen Stelmak</u>	<u>202 W Superior St., Suite 321</u>
<input type="checkbox"/> Add			<u>Duluth, MN 55802</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>STD</u>	<u>Maureen A. Spanier</u>	<u>202 W Superior St., Suite 321</u>
<input type="checkbox"/> Add			<u>Duluth, MN 55802</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>PD</u>	<u>Elias Patoucheas</u>	<u>One Lakeshore Center</u>
<input checked="" type="checkbox"/> Add			<u>Bridgewater, MA 02324</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>VD</u>	<u>Kim Tobias</u>	<u>One Lakeshore Center</u>
<input checked="" type="checkbox"/> Add			<u>Bridgewater, MA 02324</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>STD</u>	<u>Matthew Stephen O'Donnell</u>	<u>One Lakeshore Center</u>
<input checked="" type="checkbox"/> Add			<u>Bridgewater, MA 02324</u>
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

(attach additional sheets, if necessary). (Be specific)

N/A

September 1, 2015

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

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** 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 September 1, 2015

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)

Elias Patoucheas

(Typed or printed name of person signing)

President

(Title of person signing)