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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NC
CRC
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Gainesville Apartment Association
P.O. Box 140926
Gainesville, Florida 32614-0926



352-333-0333
Fax 352-333-9090

Attn: Karen Saly

I have sent the wrong form in .
I am sending in the Amendment Form

Please use the \$35.00 for the Amendment Form that I have already paid.

Marie Hudson

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: North Central Florida Apartment Association, Inc.

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

MARIE Hudson

(Name of Contact Person)

North Central Florida Apartment Association, Inc.

(Firm/ Company)

P.O. BOX 140926

(Address)

Gainesville, Fl. 32614

(City/ State and Zip Code)

For further information concerning this matter, please call:

MARIE Hudson

(Name of Contact Person)

at (352) 332-0333

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

*paid
see form*

☐ \$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)

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

Gainesville Apartment Association, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: April 1, 2008

Effective date if applicable: _____
(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 was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

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.)

Marie Hudson
(Typed or printed name of person signing)

Administrative Executive
(Title of person signing)

FILING FEE: \$35