N0600000001

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

C. LEWIS

AUG 7 2014

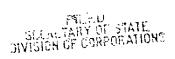
EXAGMMER

CÓVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Royal Palm Gardens Condominium Association, Inc.			
DOCUMENT NUMBER: N0600002901			
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Olimpia M. Fernandez			
	(Name of Contact Person	n)	
Royal Palm Gardens Co	ndominium	Association, Inc.	
	(Firm/ Company)		
4655 Palm Avenue, Apt	216-A		
	(Address)		
Hialeah, FL 33012			
·	(City/ State and Zip Cod	e)	
royalpalm4655@y	yahoo.com		
E-mail address: (to be used		notification)	
For further information concerning this matter, please	call:		
Olimpia M. Fernandez	786	298-7988	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to **Articles of Incorporation** of



OI OI		
Royal Palm Gardens Condominium Association, Inc.	14 JUL 25	AM 10: 59
(Name of Corporation as currently filed with the Florida Dept. of State)		
N0600002901		
(Document Number of Corporation (if known)		
Durswant to the provisions of section 617 1006. Florida Statutes, this Florida Not For Profit (Cornoration ado	nts the following

ing

A. If amending name, enter the new name of the corpo	ration:
N/A	The
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "h
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	N/A sss)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent: N/A	
new registered agent and/or the new registered offic	
Name of New Registered Agent: Name of New Registered Agent:	e address:
Name of New Registered Agent: New Registered Office Address:	(Florida street address)

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	<u>V Mi</u>	<u>hn Doe</u> ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	Niurka Concepcion	4655 Palm Avenue
X Add			Apt 216-A
Remove			Hialeah, FL 33012
2) Change	<u>s</u>	Jorge Aguiar	4655 Palm Avenue
Add			PO Box 138598
X Remove			Hialeah, FL 33012
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	was also to the state of the st		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
/A			
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	date of each amendment this document was signed.	• •	SECURE OF CORPORATIONS	, if other than the
	ective date <u>if applicable</u> :	07/21/14	givision of correlation. for ameniment filedate, AM 10: 59	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/w was/were sufficient for ap	• •	number of votes cast for the amendment(s)	
	There are no members or adopted by the board of d		ndment(s). The amendment(s) was/were	
	Dated 07/2	21/14	<u></u>	
	Signature	insign the	·	
	(By the have n		ard, president or other officer-if directors - if in the hands of a receiver, trustee, or ciary)	
	Olimpia	a M. Fernandez		
		(Typed or printed name of pers	on signing)	
	Preside	ent		
		(Title of person sign	ing)	