

N06000003682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

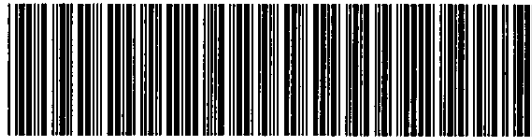
(Business Entity Name)

(Document Number)

## Certificates of Status

**Special Instructions to Filing Officer:**

Office Use Only



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FILED  
07 JUN 11 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**T. Roberts JUN 11 2007**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 31, 2007

JAMIE TARICH  
BLAXBERG, GRAYSON, KUKOFF & STRAUSS  
STE 730, INGRAHAM BLDG., 25 SE 2ND AVE  
MIAMI, FL 33131-1506

SUBJECT: LOS ROBLES CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N06000003682

We have received your document for LOS ROBLES 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):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Registered Agent signature is not acceptable.

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) 245-6892.

Tina Roberts  
Document Specialist

Letter Number: 907A00037335

RECEIVED  
07 JUN 11 AM 8:00  
DIVISION OF CORPORATIONS

LAW OFFICES  
**BLAXBERG, GRAYSON, KUKOFF & STRAUSS**

A PROFESSIONAL ASSOCIATION  
SUITE 730, INGRAHAM BUILDING  
25 SOUTHEAST SECOND AVENUE  
MIAMI, FLORIDA 33131-1506  
TELEPHONE (305) 381-7979  
FACSIMILE (305) 371-6816

JAMIE TARICH, ESQ.  
WRITER'S DIRECT LINE:  
305-381-7979 EXT. 330  
E-MAIL: [JAMIE.TARICH@BLAXGRAY.COM](mailto:JAMIE.TARICH@BLAXGRAY.COM)

May 21, 2007

**Amendments Section**

Florida Department of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: Los Robles Condominium Association, Inc.**  
**Our file no. 1339-24**  
**Amendment to Articles**  
**Document No. N06000003682**

Dear Sir/Madam:

This firm represents the Los Robles Condominium Association, Inc., a Florida not-for-profit corporation, listed with the Florida Department of State as document no. N06000003682.

Enclosed is an Article of Amendment changing the directors and corporate officers for the corporation, along with a check for \$35.00 to cover the filing fee. Please process this request and notify the undersigned upon completion.

Thank you for your attention to this matter. Should you have any questions, please do not hesitate to contact me.

Very truly yours,



Jamie Tarich

Enclosures  
Cc: Los Robles Condominium Association, Inc.  
584/JT/1339-24

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** LOS ROBLES CONDOMINIUM ASSOCIATION, INC.

**DOCUMENT NUMBER:** N06000003682

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

Please return all correspondence concerning this matter to the following:

Jamie Tarich

(Name of Contact Person)

Blaxberg, Grayson, Kukoff & Segal, P.A.

(Firm/ Company)

25 Southeast 2nd Avenue., Suite 730

(Address)

Miami, Florida 33131

(City/ State and Zip Code)

For further information concerning this matter, please call:

Jamie Tarich

(Name of Contact Person)

at ( 305 ) 381-7979

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
07 JUN 11 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LOS ROBLES CONDOMINIUM ASSOCIATION, INC.

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

N06000003682

(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:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

Officers and Directors:

Jeff Sherman - PD

Thelma Sherman - VPD

Ian Hagen - TSD

(Attach additional pages if necessary)  
(continued)

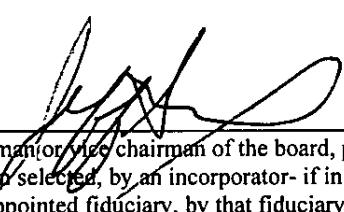
The date of adoption of the amendment(s) was: May 18, 2007

Effective date if applicable: May 18, 2007  
(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.)

Jeff Sherman

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**