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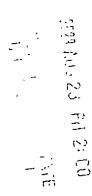
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TO: Amendment Section Division of Corporations

^ /
NAME OF CORPORATION: 1951 Market Condominium ASSOCIATIO
DOCUMENT NUMBER: <u>N:0-60-0-0-0-0-4-9-52</u> NOG00004962
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sonia Deville
(Name of Contact Person)
Managers Mailbox
(Firm' Company)
1951 N. Market St.
Jacksonville, FL 32206
marketshoog out look com E-mail address: (to be used the annual report notification)
for further information concerning this matter, please call:
Macy To Kil culter at 904-874-1338 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State:
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee US43.75 Filing Fee & US43.75 Filing Fee & US52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, Ft. 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

1951 Market Condominium ASSO (Name of Corporation as currently filed with the Florida Dept. of State)	ciation, I
NO6000004962 (Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the foliamendment(s) to its Articles of Incorporation:	lowing
	he new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name.	"Inc."
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)	
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:	
New Registered Office Address: [Flonda street address]	
. Florida, Cityi (Zip Code)	<u> </u>
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.	77 P
Signature of New Registered Agent, if changing	C

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 Mike	Doe Jones Smith				
Type of Action (Check One)	Title	Name		Address		
1) Change Add	Treasure	1 David	1 Greenha	lgh 1951	V. Mark	et St.
Remove 2) Change Add	Treasurer	Macy	Jo Kileu	len 1951 N. manag	Market Pers Ma	
Remove 3)				_Jax,	<u>FL 37</u> 5	206
4) Change						
Remove						
5) Change Add						
Remove				 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6) Change Add						793 kus 23
Remove						· · · · · · · · · · · · · · · · · · ·
	r adding additional A al sheets, if necessary					11 2: CO
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		E. C.
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90) days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	es not meet the applicable statutory filing requirements, this date wi ent of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)

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

Signature

(By the chairman or rice 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 tiduciary)

OPU - Jo Kiloulley (Typed or printed name of person signing

Treasurer (Title of person signing)

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