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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Grand Oaks of Tampa Bay Condominium Association					
DOCUMENT NUMB	ER: N06000009127				
The enclosed Articles	of Amendment and fee are subm	itted for	filing.		
Please return all corres	pondence concerning this matter	to the f	ollowing:		
	Rot (Name of C	Kilgo ontact P	erson)		
	(**************************************		,		
 	Grand Oa				
	(Firm) (Compan	y)		
	8450 Standish		Dr - Offic	e	
	(Ad	dress)			
	Tampa	FL 336	315		
	(City/ State	and Zip	Code)		
	rkilgo@v E-mail address: (to be used to			eport notification	on)
For further information	concerning this matter, please c	all:			
Rob Kilgo		at (727	434-1465	- <u>-</u>
(Name o	f Contact Person)		(Area Co	de & Daytime	Telephone Number)
Enclosed is a check for	the following amount made pay	able to t	he Florida	Department of	State:
 	\$43.75 Filing Fee & Certificate of Status	Certifi	.75 Filing led Copy lional copy sed)		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section			Street A	ddress ent Section	•
	n of Corporations			of Corporations	
Tallahassee, FL 32314				ecutive Center Ci	ircle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Grand Oaks of Tampa Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N0600009127 (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:

he new name must be distinguishable and abreviation "Corp." or "Inc." <u>"Company</u>		
Enter new principal office address, if a Principal office address MUST BE A STR		
Enter new mailing address, if applicat	ble:	
(Mailing address MAY BE A POST OF)		······································
	or registered office address in Flori	da, enter the name of th
(Mailing address MAY BE A POST OF) If amending the registered agent and/o	or registered office address in Flori	da, enter the name of th
(Mailing address MAY BE A POST OF) If amending the registered agent and/o new registered agent and/or the new re	or registered office address in Floriegistered office address;	
(Mailing address MAY BE A POST OF) If amending the registered agent and/o new registered agent and/or the new re	or registered office address in Flori egistered office address: Tisha Perry	PRIVE
(Mailing address MAY BE A POST OF) If amending the registered agent and/o new registered agent and/or the new research of New Registered Agent:	or registered office address in Floriegistered office address; Tisha Perry 8450 STANDISH BEND D	PRIVE

Signature of New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	MARC J. ROSENWASSER	115 SOUTH LOIS AVENUE SUITE 126 TAMPA FL 33609	_ ☐ Add _ ☐ Remove
SD	YVETTE C. COLLAZO.	115 SOUTH LOIS AVENUE SUITE 126 TAMPA FL 33609	_ ☐ Add _ ☑ Remove
PD	Kilgo, Robert	8450 Standish Bend Dr Tampa FL 33615	_ ☑ Add _ □ Remove
	ling or adding additional Articles, ente Iditional sheets, if necessary). (Be spec		
- M			

The date of each amendmen	t(s) adoption: 10/27/2009
Effective date <u>if applicable</u> :	(date of adoption is required) 10/27/2009
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_10/2	27/2009
Signature _	Man Rosendan
hav	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator — if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)
	MARC J ROSENWASSER
	(Typed or printed name of person signing) RESIDENT DIRECTOR
	(Title of person signing)

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