N06000009810

(Re	questor's Name)			
(Ad	dress)	·····		
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
1 (Bu	siness Entity Nam	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 24, 2015

MAREK CYZIO / SAWGRASS EXECUTIVE CONDOMINIUM INC 1368 TIPPERARY DRIVE MELBOUNE, FL 32940 US

SUBJECT: SAWGRASS EXECUTIVE CONDOMINIUM, INC.

Ref. Number: N06000009810

We have received your document for SAWGRASS EXECUTIVE CONDOMINIUM, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 015A00008417

Carolyn Lewis Regulatory Specialist II

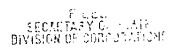
www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SAWGRASS EXECUTIVE CONDOMINIUM
DOCUMENT NUMBER: <u>NO6 00 000 9 810</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARKK CYZIO
MAREK CYZIO (Name of Contact Person)
(Firm/ Company)
1368 TIPPERARY DR (Address)
MELBOURNE FL 32940 (City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MAREK CYZIO at (321) 505 9736 (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:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$\$43.75 Filing Fee & \$\sum \\$\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



15 HAY -5 PH 12: 44 SAWGRASS EXECUTIVE CONDOMINIUM, INC.

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

N0600009810
(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 following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: 368 TIPPERARY DR (Principal office address MUST BE A STREET ADDRESS) MELBOURNE, FL 32940
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1368 TIPPERARY DR MELBOURNE, FL 32940
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: MAREK CYZIO
136 & TIPPERARY DR (Florida street address) New Registered Office Address:
MELBOURNE, Florida 32940 (City) (Zip Code)
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.
\mathcal{N}_{τ}
Signature of New Registered Agent, if Changing
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 <math>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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	<u>»</u>	ROBERT L. SMITHSON	3809 DFACON WAY (OCOA, FL 32926
2) Change Add Remove	<u></u>	<u>LINDA</u> SMITHSON	3809 DEACON WAY (OCOA, FL 32926
3) Change Add Remove	<u>P</u> _	MAREK	1368 TIPPERARY DR MECBOURNE, FC 32940
4) Change Add Remove	<u>V</u>	SID BASHORE	701 SUNBURY DR WINTER SPRINGS FL, 32708
5) Change Add Remove		RAYMOND	1310 N. SHORE DR. LEESBURG, FL 34748
6) Change Add Remove	\checkmark		

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	
	,	
P. I		

The date of each amendment(s) ad	loption:	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	, if other than the
date this document was signed.		DIVISION OF COAFT	PACICAL
Effective date <u>if applicable</u> :		15 MAY 5 DM	12։ և և
	(no more than 90 days after an	nendment file date) 15 MAY - 5 PM	16. 71
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the numberal.	er of votes cast for the amendment(s)	
☐ There are no members or members adopted by the board of directors	bers entitled to vote on the amendmen ors.	t(s). The amendment(s) was/were	
Dated <u></u>	13/2015		
Signature	1./2		
have not be	man or vice chairman of the board, pr en selected, by an incorporator – if in appointed fiduciary by that fiduciary)		
MA	REK CYZID		
	(Typed or printed name of person sig		
	PRESIDENT		
	(Title of person signing)		