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18 APR 25 AM IO: 03
SECRETARY SERVICES
IN 1 ABOUT SERVICES

R. WHITE APR 2 6 2018

COVER LETTER

Division of Corporations NAME OF CORPORATION: RIVERBEND BUSINESS CENTER CONDOMINIUM
ASSOCIATION, INC. DOCUMENT NUMBER: NO6000010931 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PHILIP LEBLANC
(Name of Contact Person) (Firm/ Company) PJLELECTRIC & GMAIL, COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PHILIP LEBUALC at 954.5476

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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

FILED

Artic	les of Incorporation of	18 APR 25 AM 10: 09			
RIVERBEND BUSINESS CENTER COND. (Name of Corporation as curre	SOMINIUM ASS	COCKATION, INCUIA			
N06000010931					
	nber of Corporation (if know	n)			
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Pr</i>	ofit Corporation adopts the following			
A. If amending name, enter the new name of the corpora	ation:				
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	ration" or "incorporated" of	The new rthe abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applicable:	10004 A	IW 46 ST.			
(Principal office address MUST BE A STREET ADDRESS	C)	FL 33351			
C. Enter new mailing address, if applicable:	10004	w 46 ST.			
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>		1FL 33351			
D. If amending the registered agent and/or registered of	fice address in Florida, ent	er the name of the			
new registered agent and/or the new registered office		.5			
Name of New Registered Agent:					
100	030 NW 4	6 St.			
New Registered Office Address:	(Florida	street address)			
50	UNRISE	, Florida <u>33351</u>			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j	d Agent: familiar with and accept the	obligations of the position.			
	Signature of New Registered	Agent, if changing			

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	PT John I V Mike S SV Sally S	lones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>D</u>	GREGG BERGER	5359 NOB HILL ROAD SUNRISE, FL 33351
2) Change Add		ANDREW BEHM	5359 NOBHILL ROAD SUNRISE, FL 33351
Remove 3) Change Add Remove	<u>C</u>	CHRIS CAVO	10004 NW 4657 SUNRISE, FL 33351
4) Change Add	<u>C</u>	PHILIP LEBLANC	10004 NW 465T SUNRISE, FL 33351
Remove 5) Change Add	<u>C</u>	HUGO DEFERRARI	10004 NW 46 57 SUNRISE, FL 33351
Remove 6) Change Add Remove			

L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
N/A				
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	e date of each amendment(s) adoption: _ e this document was signed.	4/19/18	, if other than the
	ective date <u>if applicable</u> :	4/19/18 more than 90 days after amendment file da	te)
	·	ot meet the applicable statutory filing require	
Ado	option of Amendment(s) (C	CHECK ONE)	
\	The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast fo	or the amendment(s)
	There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amend	ment(s) was/were
	Dated 4	8	
	Signature (R. Wachairman duri	ce chairman of the board, president or other	officer if discotors
	have not been selecte	d, by an incorporator – if in the hands of a re fiduciary by that fiduciary)	
	PHILI	PLEBLANC	
		(Typed or printed name of person signi	ng)
	<u>CHAI</u>	RMAN	
		(Title of person signing)	