

1/19/2012 1:14 PM

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# N06000012785

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : RITTER, ZARETSKY & LIEBER, LLP  
Account Number : I20010000015  
Phone : (305)372-0933  
Fax Number : (305)704-8111

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Vivian@RZLLAW.COM

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
MISSION OVERLOOK CONDOMINIUMS ASSOCIATION, INC.**

Certificate of Status	0
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Page Count	05
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*Amend*

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TALLAHASSEE, FLORIDA

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January 19, 2012

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MISSION OVERLOOK CONDOMINIUMS ASSOCIATION, INC.

PO BOX 13089

TALLAHASSEE, FL 32301

SUBJECT: MISSION OVERLOOK CONDOMINIUMS ASSOCIATION, INC.

REF: N06000012785

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

FAX Aud. #: E12000016018  
Letter Number: 912A00001360

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

**FILED**  
12 JAN 27 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

**MISSION OVERLOOK CONDOMINIUMS ASSOCIATION, INC.**

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

**N06000012785**

*(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:

**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:**

*(Principal office address MUST BE A STREET ADDRESS)*

**2262 Del Carmel Way**

**Tallahassee, FL 32302**

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

**c/o EMS**

**P.O. Box 13089**

**Tallahassee, FL 32317**

**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:*

**Bitter, Zaretsky, Lieber + Jaime, LLP**  
**2915 Biscayne Blvd.**

*(Florida street address)*

*New Registered Office Address:*

**Miami**

**Florida 33137**

*(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.*

*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:

Change      PT      John Doe  
 Remove      V      Mike Jones  
 Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>DPST</u>	<u>DOUGLAS E. TURNER</u>	<u>502-C Capital Cir SE</u> <u>Tallahassee, FL 32301</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DP</u>	<u>Walter Hinds</u>	<u>100 State Street, 11th Floor</u> <u>Boston, MA 02109</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DV</u>	<u>Andrew Kraus</u>	<u>100 State Street, 11th Floor</u> <u>Boston, MA 02109</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DST</u>	<u>Kelly Hinds</u>	<u>100 State Street, 11th Floor</u> <u>Boston, MA 02109</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____



27. 2012 9:53AM

6/2012 13:35 8505977456

CYPRESS GARDENS

No. 2340 P. 5

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The date of each amendment(s) adoption:

1/12/2012

Effective date if applicable:

01/12/2012

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

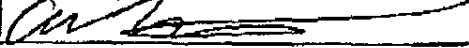
(CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- 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

1/12/12

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)

Andrew Kraus

(Typed or printed name of person signing)

DV

(Title of person signing)