

N107000000426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

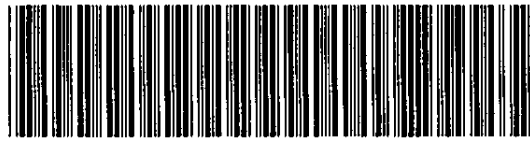
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 DEC 12 PM 2:47

Amend  
@ 12/12/12

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Residences at City Place Condominium Association, Inc.  
DOCUMENT NUMBER: NO 7000000 426

The enclosed *Articles of Amendment* and fee are submitted for filing. - NA

Please return all correspondence concerning this matter to the following:

Melody Griffith  
(Name of Contact Person)

Residences at City Place  
(Firm/ Company)

311 W. Ashley Street  
(Address)

Jacksonville, FL 32202  
(City/ State and Zip Code)

mgriffith@tcgmt.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melody Griffith at (904) 354-0531  
(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
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

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

RECEIVED

12 NOV 13 AM 8:53

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 4, 2012

MELODY GRIFFITH  
RESIDENCES AT CITY PLACE CONDOMINIUM  
311 W. ASHLEY STREET  
JACKSONVILLE, FL 32202

SUBJECT: RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION,  
INC.

Ref. Number: N07000000426

We have received your document for RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 112A00028787

RECEIVED

12 DEC 12 AM 10:33

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 26, 2012

MELODY GRIFFITH  
RESIDENCES AT CITY PLACE  
311 W. ASHLEY STREET  
JACKSONVILLE, FL 32202

SUBJECT: RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION,  
INC.

Ref. Number: N07000000426

We have received your document for RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter. \*

The current name of the entity is as referenced above. Please correct your document accordingly. \*

The date of adoption of each amendment must be included in the document. \*

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 912A00028075

RECEIVED

12 DEC -4 AM 8:23

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2012

MELODY GRIFFITH  
RESIDENCES AT CITY PLACE  
311 W. ASHLEY STREET  
JACKSONVILLE, FL 32202

SUBJECT: RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION,  
INC.

Ref. Number: N07000000426

We have received your document for RESIDENCES AT CITY PLACE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6050.

Irene Albertson  
Regulatory Specialist II

Letter Number: 512A00027490

RECEIVED

12 NOV 21 AM 10:09

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of:

Residencies at City Place Condominium Association Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

NO 7000000 426

(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)

**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: \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address:

\_\_\_\_\_, Florida  
(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

12 DEC 12 PM 2:47  
SECRETARY OF CORPORATIONS  
FLORIDA STATE

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Tess Buta</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Marc Love</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Charles Culp</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Eugene Cosa</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Fan Taylor</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>
6) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Michael Lanier</u>	<u>311 W. Ashley Str.</u> <u>Jacksonville, FL</u> <u>32202</u>





The date of each amendment(s) adoption: 8/3/2012

Effective date if applicable: \_\_\_\_\_  
(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 12/10/2012

Signature IAN TAYLOR  
(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)

I. J. I...  
(Typed or printed name of person signing)

Secretary  
(Title of person signing)