

| (Requ | estor's Name) | | |
|---|-----------------|-----------|--|
| (Addre | ess) | | |
| (Addre | ess) | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Busir | ness Entity Nam | e) | |
| (Document Number) | | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | • | | |
| | | | |

Office Use Only



600253853496

11/18/13--01033--009 **35.80

EGNETARY OF STATE LLAHASSEE, FLORID

NOV 22 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations Kendall Lakes Office Park Condominium Assocation, Inc. NAME OF CORPORATION: N07000002238 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rick Suarez (Name of Contact Person) Kendall Lakes Office Park Condominium Association C/O Castle Realty (Firm/ Company) 13550 SW 88 Street Suite 250 (Address) Miami, FL 33186 (City/ State and Zip Code) ricksuarez@castle-realty.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rick Suarez (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: □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

Articles of Amendment to Articles of Incorporation

FILED 13 157 18 PH 2: 45

Kendall Lakes Office Park Condominium Association, Ind. Alassee, FLORIDA

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

N0700002238

(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 na | me of the corporation: | |
|---|--|--|
| name must be distinguishable and contain "Company" or "Co." may not be used in | the word "vorporation" or "incorporated" or the abbr | The neverties of the contract of the contr |
| B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u> | | |
| C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST O</u> | | |
| new registered agent and/or the new | Nor registered office address in Florida, enter the nate registered office address: Castle Realty | me of the |
| Name of New Registered Agent: | 13550 SW 88 Street Suite 250 | - |
| New Registered Office Address: | (Florida street address) | 22400 |
| | Miami , Florida | 33186 (Zip Code) |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | anging Registered Agent: red agent: I am familyar with and accept the obligation | ns of the position. |
| | 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 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 E V Mike J SV Sally S | ones | |
|-----------------------------------|-------------------------------------|----------------------|--------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | DP | Evelyn Puig-Vazquez | 13550 SW 88 Street |
| Add | | | Suite 120 |
| X Remove | | | Miami, FL 33186 |
| 2) X Change | PD | Sam Dror | 13500 SW 88 Street |
| Add | | | Suite 287 |
| Remove | | | Miami, FL 33186 |
| 3) Change | VPD | Marcela C. Rodriguez | 13550 SW 88 Street |
| X | | | Suite 140 |
| Remove | | | Miami, FL 33186 |
| 4) X Change | STD | Rick Suarez | 13550 SW 88 Street |
| Add | | | Suite 250 |
| Remove | | | Miami, FL 33186 |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | Page 2 of 4 | |

| . If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) |
|---|--|
| • | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · |
| | |
| | |
| | , and a second s |
| | |
| | Tarana a s |
| | |
| | |
| and the second | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| The | , if other than the | | | |
|---|---|---|--|--|
| Effective date if applicable: (no more than 90 days after amendment file date) | | | | |
| Ada | option 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 11/14/2013 | | | |
| | 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) | _ | | |
| | Rick Suarez | | | |
| | (Typed or printed name of person signing) | | | |
| | Treasurer | | | |
| | (Title of person signing) | | | |