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SECRETARY OF STATE
IAITAMASSEE, FLORIDA

DEC 04 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

Cityview Condomii	nium Association. Inc		
N 07000002240			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mate	ter to the following:		
James S. Resch			
	(Name of Contact Pe	erson)	
New Life Village Management Co.			
	(Firm/ Company	·)	· · · · · · · · · · · · · · · · · · ·
4926 Venice Lake Avenue			
	(Address)		
Tampa, FL 33619			
	(City/ State and Zip	Code)	
propertymanagement@newlifevillage.org			
E-mail address: (to be use	d for luture annual rep	ort notification	1)
For further information concerning this matter, please	cull:		
James S. Resch	ai	813	304-0623
(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida E	Department of !	State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		eet Address	
Amendment Section Division of Corporations		endment Secti	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Cityview Condominium Association, Inc.

·	ntly filed with the Florida Dept. of State)
N 07000002240	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 617,1006. Florida Statute imendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
New Life Village Condominium Association, Inc.	The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbreviation "Corp " or "Inc."
3. Enter new principal office address, if applicable:	4926 Venice Lake Avenue
Principal office address MUST BE A STREET ADDRESS)	Tumpa, FL 33619
	₹0. 6
	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4926 Venice Lake Avenue
(Maning address only payer) our or (1700 more)	Tampa, FL 33619
	7,
	्र _ा
 If amending the registered agent and/or registered office new registered agent and/or the new registered office are 	
new registered agent antolor the new registered office at	Multist.
Name of New Registered Agent	
New Registered Office Address:	(Honda sirvei address)
	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered.	Agent:
hereby accept the appointment as registered agent I am fan	
e.	ignature of New Registered Agent, if changing
Sil	ignature 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 = ChiefExecutive Officer; CEO = Chief Financial Officer. If an afficer 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 A Add	PT John D V Mike J SV Sally S	ones mith	NA	
Type of Action (Check One)	<u>Title</u>	Name	1 . 1 .	<u>Addres</u> s
!) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
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S) Charac				
5) Change				
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		November 1, 2018	
	e date of each amendment(s) adop e this document was signed.	ion:	, if other than the
ЕП	ective date <u>if applicable</u> :		
	<u>-</u>	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Depar	does not meet the applicable statutory filing requirements, tment of State's records.	, this date will not be listed as the
Add	option of Amendment(s)	(<u>CHECK ONE</u>)	
⊟	The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes east for the a	mendment(s)
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s)) was/were
	Dated	2/18	
	Signature		
	(By the chairma have not been s	n of vice nairman of the board, president or other officer- elected, by an incorporator – if in the hands of a receiver, ointed fiduciary by that fiduciary)	
		I.S. Resch	
		(Typed or printed name of person signing) President	
		(Title of person signing)	