N07000005177

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500330380485

06/10/18--0152, -025 ** 35.06

SECOND OF CORPORATIONS

brumo

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	Cobblestone at Pem ION:	broke Condominium	n Associati	on, Inc.			
DOCUMENT NUMBER:	N07000005177						
The enclosed Articles of A		mitted for filing.		_			
Please return all correspond	lence concerning this matt	er to the following:					
Maria T Hernandez							
		(Name of Contact I	Person)				
Cobblestone Community A	Association						
		(Firm/ Compar	ıy)				_
14701 SW 10 St.							
		(Address)					_
Pembroke Pines, Fl. 33027	ı						
		(City/ State and Zip	Code)				_
manager@cobblestone.com	ımunity						
	E-mail address: (to be used	for future annual re	port notific	cation)	· · · ·		— 15:05
For further information con-	cerning this matter, please	call:				19 13	KUS Fred
Maria T Hernandez		a	786 t	719-8	992	01	- 12 H - 12 H - 12 H
	(Name of Contact Person))	(Area Co	de) (Dayti	me Telephor	ie Number)	<u></u>
Enclosed is a check for the t	following amount made page	yable to the Florida	Departmen	it of State:		ည် လုံ	RY'S JIME CORPORATIONS
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is C	52.50 Filing fertificate of Sertified Copy Additional Co Enclosed)	Status)NS

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 of

Cobblestone at Pembroke Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N07000005177 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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

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	<u>V</u> <u>M</u> :	hn Doe ike Jones lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) X Change	P	ROBIN BAPTISTE	14701 SW 10TH STREET
Add			PEMBROKE PINES, FL 33027
Remove			
2) X Change	<u>T</u>	GARY BARTON	14701 SW 10TH STREET
Add			PEMBROKE PINES, FL 33027
Remove			
3) x Change	D	BLAS DIAZ	14701 SW 10TH STREET
Add			PEMBROKE PINES, FL 33027
Remove			
4) Change Add			
Remove			
5) Change			
Add			
Remove			
∩ Change Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
N/A		
		<u>_</u>

 .		N/A	
	e date of each ame this document wa	endment(s) adoption:s signed.	, if other than the
Effe	ective date <u>if appli</u>	icable:	
		(no more than 90 days after amendment file date)	
<u>Not</u> doc	e: If the date inser ument's effective d	ted in this block does not meet the applicable statutory filing requirements, this date will not be ate on the Department of State's records.	listed as the
Adoption of Amendment(s)		ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	5/7/2019	
	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)	
		Robin Baptiste	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	