

N07000008784

(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:

Office Use Only



200241479262

11/27/12--01003--015 \*\*52.50

*Amk  
gws  
& cc*

FILED  
12 DEC 14 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 17 2012

C. MUSTAIN

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Colonial Palms Condominium Association, Inc.

DOCUMENT NUMBER: N07000008784

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

Please return all correspondence concerning this matter to the following:

Oral Beason, Esq.

(Name of Contact Person)

Nordland Assets, LLC

(Firm/ Company)

1180 SW 36th Avenue, Suite 100

(Address)

Pompano Beach, FL 33069

(City/ State and Zip Code)

nordlandassets@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Oral Beason, Esq.

(Name of Contact Person)

at ( 954 ) 580-0995

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 29, 2012

ORAL BEASON  
1180 SW 36TH AVE., STE 100  
POMPANO BEACH, FL 33069

SUBJECT: COLONIAL PALMS CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N07000008784

We have received your document for COLONIAL PALMS CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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.

Carol Mustain  
Regulatory Specialist II

Letter Number: 312A00028430

**Colonial Palms Condominium Association, Inc.**

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

N07000008784

(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:**

*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)**

**1180 SW 36th Avenue**

## Suite 100

Pompano Beach, FL 33069

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

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

1180 SW 36th Avenue

## Suite

Pompano Beach, FL 33069

**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:

**Nordland Assets, LLC**

**1180 SW 36th Avenue, Suite 100**

(Florida street address)

New Registered Office Address:

## Pompano Beach

\_\_\_\_\_, Florida 33069  
(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.*

For Nordland Assets, LLC  
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:

<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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>PD</u>	<u>Andrew Friis</u>	<u>801 NE 71st Street</u>
<input type="checkbox"/> Add			<u>Boca Raton, FL 33487</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PD</u>	<u>Jan-Eric Samuel</u>	<u>1180 SW 36th Avenue</u>
<input checked="" type="checkbox"/> Add			<u>Suite 100</u>
<input type="checkbox"/> Remove			<u>Pompano Beach, FL 33069</u>
3) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
4) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
5) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
6) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

Not Applicable

The date of each amendment(s) adoption: November 16, 2012

Effective date if applicable: November 16, 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 December 12, 2012

Signature

Jan-Eric Samuel  
(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)

Jan-Eric Samuel

(Typed or printed name of person signing)

President

(Title of person signing)