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COVER LETTER

TO: Amendment Section

Division of Corporations The Palms of Gainesville Condominium Association Inc. NAME OF CORPORATION: N07000009541 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Linda McGurn (Name of Contact Person) (Firm/ Company) 101 SE 2nd Place Ste 202 (Address) Gainesville, FL 32601 (City/ State and Zip Code) linda@mcgurn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Linda McGurn (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee ■\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassec. FL 32314

Articles of Amendment to Articles of Incorporation



The Palms of Gainesville			C
(Name of Corporation as currently N07000009541	y filed with the Flo	orida Dept. of State)	
	iment Number of C	orporation (if known)	
		·	Communication adapts the fallowing
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		es. Inis <i>Fioriaa Not For Projit</i>	Corporation adopts the following
A. If amending name, enter the new na	me of the corporat	ion:	
			The new
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		101 SE 2nd Place	9
		Suite 202	
		Gainesville FL 32	601
C. Enter new mailing address if appli	a bla		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		101 SE 2nd Place	
		Suite 202	
		Gainesville FL 32	2601
D. If amending the registered agent and	d/or registered offi	ce address in Florida, enter tl	ie name of the
new registered agent and/or the new			
Name of New Registered Agent:	Linda McG		
	101 SE 2nd Place Ste 202		
New Registered Office Address:		(Florida street address)	
	Gainesville	, F	lorida 32601
	(City))	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			vations of the position.
/ Accept the appointment as register	Warf.	Moueu	D A Y
	Signature of Nov	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 <math>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> i	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	DV	Greg Trunnell	4209 NW 155th Terrace
Add XRemove			Gainesville FL 32669
2) Change	DP	Ken McGurn	101 SE 2nd Place Ste 202
X Add			Gainesville FL 32601
3) Change	D	John Luppino	102 Putters Ct
X Add			Warner Robbins, GA 31088
4) Change	DV	Albert Matheny	2613 NW 24th Terrace
X Add Remove			Gainesville, FL 32605
5) Change	<u>TS</u>	Linda McGurn	101 SE 2nd Place Ste 202
X Add Remove			Gainesville, FL 32601
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Arti</u>	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
NONE	
	· · · · · · · · · · · · · · · · · · ·

	date of each amendment(s) adoption	n:	, if other than the
date	this document was signed.		
Effe	ctive date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	
X	There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
	Dated12-10	2-14	
	Signature	lin M. A.	
	have not been sele	of vice chairman of the board, president or other officer-if directors ected, by an incorporator — if in the hands of a receiver, trustee, or need fiduciary by that fiduciary)	
	Ken McGurn		
	(Турс	ed or printed name of person signing)	
	Director Pre	sident	
		(Title of norson signing)	