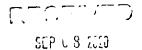
## N08 000 000 825

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

Office Use Only



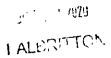
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ium Association, Inc.
N08000000825	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are subn	nitted for filing.
Please return ali correspondence concerning this matte	r to the following:
Melissa Price	
	Name of Contact Person)
City Cove Condominium Association, Inc.	
	(Firm! Company)
301 Vantage Point Ln Apt 7	
	(Address)
Tallahassee, Florida 32301	
(	City/ State and Zip Code)
price2m@gmail.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please of	eall:
Melissa Price	434 222-4858 at
(Name of Contact Person)	at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	rable to the Florida Department of State:
\$\mathbb{G}\$\$ \$35 Filing Fee \( \bigcup \Big	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

City Cove Condominium Association, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N08000000825 (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: (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: (Florada street address) New Registered Office Address:

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

\_\_\_\_\_, Florida \_

(Zip Code)

## 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: XChange X Remove X Add	PT         John De           Y         Mike Je           SV         Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>T, S</u>	Keith Burnsed	1978 Tung Hill Road Tallahassee, FL 32303
× Remove			
2) Change Add	<u>T, S</u>	Melissa Price	301 Vantage Point Ln Apt 7 Tallahassee, FL 32301
Remove 3 ) Remove Add Remove	D	Lisa Gregg	3240 Rue de Lafitte Dr Tallahassee, FL 32312
4) Change Add	<u>D</u>	Ashley Hagenbuch	301 Vantage Point Ln Apt 9 Tallahassee, FL 32301
Remove			
5/ Change Add			
Remove			
6) Change Add			
Remove			_
E. If amending or addin (attach additional shee	g additional Articles, if necessary).	cles, enter change(s) here: (Be specific)	
N/A			
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e date of each amendment(s) adoption:e this document was signed.	, if other than the
active data if applicables	
ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
te: If the date inserted in this block does not meet the applicable statutory filing requirements, this da ument's effective date on the Department of State's records.	te will not be listed as the
and the same on the isopatiment of the street as	

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 $8-31-2020$
Signature Wate Wald
(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)
(Typed or printed name of person signing)
President & Vice President
(Title of person signing)