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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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PRIMA VISTA CON NAME OF CORPORATION:	MMERCE CENTER	CONDOMINI	UM ASSOCIATION, INC.
N08000002587			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Philip W. Grosdidier			
	(Name of Contact P	erson)	
Fox McCluskey Bush Robison, PLLC			
· · · · · · · · · · · · · · · · · · ·	(Firm/ Compan	y)	
3461 SE Willoughby Blvd.			
	(Address)		
Stuart, FL 34994			
	(City/ State and Zip	Code)	••
shoffman@rhfier.com			
E-mail address: (to be used	for future annual re	port notificatio	n)
For further information concerning this matter, please	call:		
Philip W. Grosdidier	at	772	287-4444
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida	Department of	State:
■ \$35 Filing Fee □S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address  Amendment Section  Division of Corporations	Aı	reet Address nendment Sect vision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

PRIMA VISTA COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Name of Corporation as currently filed with the Flori N08000002587	da Dept. of State)	<del></del>
(Document N	umber of Corporation (if I	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	ooration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
		·
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	
	······································	<u> </u>
		- <del>22 5 T</del>
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 offi	ce address:	ES S
Name of New Registered Agent:		022 <b></b>
		7
	(1	Florida street address)
New Registered Office Address:		
		. Florida
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		ot the obligations of the position.
	Signature of New Regis	stered 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	PT         John Do           V         Mike Jo           SV         Sally Sr	nes en es	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	PTD	Robert L. Schweitzer	1441 E. Ocean Blvd. Stuart, FL 33996
x Remove			
2) Change Add	PD		1441 E. Ocean Blvd. Stuart, FL 33996
Remove 3) Remove  * Add Remove	<u>TD</u>	Richard E. Seith	1441 E. Ocean Blvd. Stuart, FL 33996
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
	·		
	·		

<del></del>	
	<del>.</del>
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	_
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dat	ed August 5, 2024
Sig	nature Maria Maloof
	(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)
	Maria Maloof
	(Typed or printed name of person signing)

[Title of person signing)

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