N08000001925

(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:

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN 20 PM 1:10

Amend
CA 1/21/09

COVER LETTER

TO: Amendment Section
'Division of Corporations

NAME OF CORPORATION: City Palms Condominium Association Inc

DOCUMENT NUMBER: N08000006925

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

Please return all correspondence concerning this matter to the following:

Andrea Norman
(Name of Contact Person)

City Palms Condominium Association
(Firm/ Company)

480 Hibiscus Street
(Address)

West Palm Beach, FL 33401
(City/ State and Zip Code)

For further information concerning this matter, please call:

Andi Norman at (561) 366.1011
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

☐ $35 Filing Fee

☐ $43.75 Filing Fee & Certificate of Status

☐ $43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

☐ $52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

December 31, 2008

ANDREA NORMAN
CITY PALMS CONDOMINIUM ASSOCIATION, INC.
480 HIBISCUS STREET
WEST PALM BEACH, FL 33401

SUBJECT: CITY PALMS CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N08000006925

We have received your document for CITY PALMS CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must have original signatures.

Photo copies are not acceptable.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 108A00062090

RECEIVED
2009 JAN 20 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2008

ANDREA NORMAN
CITY PALMS CONDOMINIUM ASSOCIATION, INC.
480 HIBISCUS STREET
WEST PALM BEACH, FL 33401

SUBJECT: CITY PALMS CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N08000006925

We have received your document for CITY PALMS CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

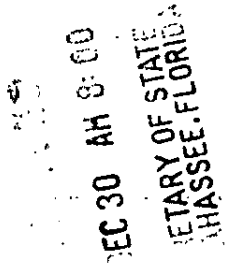
The document must have original signatures.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 008A00060588



Articles of Amendment
to
Articles of Incorporation
of

City Palms Condominium Association I

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

N08000006925

(Document Number of Corporation (if known)

FILED
09 JAN 20 PM 1:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

480 Hibiscus Street
West Palm Beach, FL
33401

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

480 Hibiscus Street
West Palm Beach, FL
33401

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: _____

New Registered Office Address: _____
(Florida street 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)

Title	Name	Address	Type of Action
Sec/Treas	Humberto Vanegas	4535 Ponce de Leon Coral Gables, FL 33146	☐ Add ☒ Remove
Vice President	Robert Sistek	480 Hibiscus St West Palm Beach, FL 33401	☒ Add ☐ Remove
Sec/Treas	Marc Coleman	480 Hibiscus St West Palm Beach, FL 33401	☐ Add ☐ Remove } Title Change

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

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(*if not applicable, indicate N/A*)

The date of each amendment(s) adoption: 12. 12. 08

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

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

☒ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."

(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 1.14.09

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Marc Coleman

(Typed or printed name of person signing)

Vice President

(Title of person signing)

(changing to Sec/Treas)