

NO 9000002419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

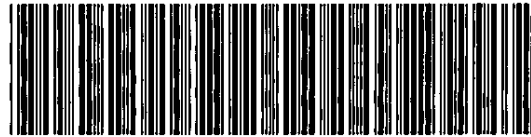
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



900297830339✓

04/21/17--01017--015 **35.00

S. TALLENT

JUN 05 2017

Amend

FILED
17 MAY 30 PM 4:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2017

MELINDA GRIMALDI, ESQ.
LAW OFFICE OF MELINDA GRIMALDI
2719 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

SUBJECT: ORCHID GARDEN CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N09000002419

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

ATTACHED IS A LISTING OF THE CURRENT OFFICERS/DIRECTORS FOR THIS CORPORATION. PLEASE AMEND YOUR DOCUMENT ACCORDINGLY.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 117A00008041

RECEIVED
17 MAY 30 AM 9:56
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Orchid Garden Condominium Association, Inc.

DOCUMENT NUMBER: N09000002419

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

Please return all correspondence concerning this matter to the following:

Melinda Grimaldi, Esq.

Name of Contact Person

Law Office of Melinda Grimaldi

Firm/ Company

2719 Hollywood Blvd.

Address

Hollywood, FL 33020

City/ State and Zip Code

melinda@grimaldi-law.com

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

For further information concerning this matter, please call:

Melinda Grimaldi at (954) 491-8707
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:

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

Articles of Amendment
to
Articles of Incorporation
of

ORCHID GARDEN CONDOMINIUM ASSOCIATION, INC.

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

N09000002419

(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

The new 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**)

2719 HOLLYWOOD BLVD

HOLLYWOOD FL 33020

C. Enter new mailing address, if applicable:

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

2719 HOLLYWOOD BLVD

HOLLYWOOD FL 33020

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:

LEON ROY HAUSMANN

2719 HOLLYWOOD BLVD, HOLLYWOOD FL 33020

(Florida street address)

New Registered Office 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)

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u> </u> Change	<u>P</u>	<u>Leon Roy Hausmann</u>	<u>2719 Hollywood Blvd.,</u>
<u>X</u> Add			<u>Hollywood, FL 33020</u>
<u> </u> Remove			
2) <u> </u> Change	<u>V</u>	<u>Henrique Perel</u>	<u>2719 Hollywood Blvd.,</u>
<u>X</u> Add			<u>Hollywood, FL 33020</u>
<u> </u> Remove			
3) <u> </u> Change	<u>S</u>	<u>Vicky Hausmann</u>	<u>2719 Hollywood Blvd.,</u>
<u>X</u> Add			<u>Hollywood, FL 33020</u>
<u> </u> Remove			
4) <u> </u> Change	<u>P</u>	<u>Carlos P. Quintela</u>	<u>201 Crandon Blvd. #523</u>
<u> </u> Add			<u>Key Biscayne, FL 33149</u>
<u>X</u> Remove			
5) <u> </u> Change	<u>VP</u>	<u>Jacqueline M. Quintela</u>	<u>201 Crandon Blvd. #523</u>
<u> </u> Add			<u>Key Biscayne, FL 33149</u>
<u>X</u> Remove			
6) <u> </u> Change	<u>S</u>	<u>Carlos P. Quintela</u>	<u>201 Crandon Blvd. #523</u>
<u> </u> Add			<u>Key Biscayne, FL 33149</u>
<u>X</u> Remove			

$\frac{1}{2}$
 $\frac{1}{4}$
 $\frac{1}{8}$

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

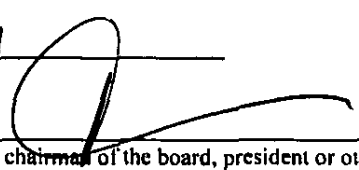
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 5/18/17

Signature 
(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)

Carlos P. Quintela
(Typed or printed name of person signing)

President
(Title of person signing)