

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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July 23, 2018

MICHAEL DODANE MIGRE ENGINEERS, LLC 760 FLROIDA CENTRAL PARKWAY, SUITE 224 LONGWOOD, FL 32750

SUBJECT: SOUTH POINTE CENTRE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N10000000285

We have received your document and check(s) totaling \$43.75. 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.

We are enclosing the proper form(s) with instructions for your convenience.

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE SEE TITLE OF THE OFFICER BEING REMOVED AND AMEND ACCORDLINGLY.

THE ATTACHMENT REFERRED TO AS THE DECLARATION OF CONDOMINIUM CANNOT BE FILED AND MUST BE REMOVED AS WELL AS THE STATEMENT ON PAGE 3 OF 4.

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

www.sunbiz.org

Letter Number: 218A00015107

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: SOUTH POINTE CENTER CONDOMINIUM ASSOCIATION N100000000 Z85 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL DUDANE

(Name of Contact Person)

MIGRE ENGINEERS LLC

(Firm/ Company)

760 FLARIDA CENTIAL PAKWAY, SUITE 224

(Address) LONGWOUR FR 32750 (City/ State and Zip Code) mike @ migre-engicum

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MICHAEL DODANG at 407, 636, 7599
(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 & \$\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

	ly filed with the Florida Dept. of State)
N10000000 285	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes imendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
· - / - ·	The new ion" or "incorporated" or the abbreviation "Corp." or "Inc."
tame must be aistinguishable and contain the word—corporati "Company" or "Co." may not be used in the name.	
3. Enter new principal office address, if applicable:	TEO FLORIAS CONTINE PARKWAY
Principal office address MUST BE A STREET ADDRESS)	SUTTE 224
	Languis, FC 32750
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME SP P
). If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac	
Mic	14-7 0/0446
Name of New Registered Agent: MC	A DA FACTOR ON VICE TO
	FLORIDA CENTRAL PKWY, SLITE Z
New Registered Office Address:	V6WVD Florida FC 37750
1 0	

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 X Remove X Add	<u>V</u> <u>Mi</u>	n <u>n Doe</u> ke Jones ll <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	510	SURYAKANT VYAS	370 WEST SABALPALM PLA
Add			SUITE 300
X_ Remove			LUNDWOOD FL 32779
2) Change	PS	MICHAEL DEDANG	760 FLURIOS CONTROL PKM
X			SUITE ZZY
Remove			LONGWOUD FL 32750
3) Change	T	KIM THIEMAN	750 FLAIDA CENTRAL PKA
X Add			LENGURUP FE 37756
Remove			
4) Change	D	RON WAKER	PG BOX 9/6/26
Add			PC BOX 9/6/26 LCNGWUD 32791
X_ Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(attach additional sheets, if necessary). (Be specific)	
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1/1/2	
The date of each amendment(s) adoption://	, if other than the
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 a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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 9/4/18	
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)	
MICHAEL PLOANE	
(Typed or printed name of person signing)	
ALBIOENT	
(Title of person signing)	