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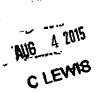




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DIVISEN OF CORPORALDHS



## **COVER LETTER**

| Division of Corporations  |
|---|
| NAME OF CORPORATION: OCEAN EAST CONDOMINIUM ASSOC., INC.  |
| DOCUMENT NUMBER: N 11 00000 4802  |
| The enclosed Articles of Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| Deboratt Cicrone  |
| (Name of Contact Person)  |
| N/A   |
| (Hirm√ Company)   |
| 266 TWIN LANE EAST  |
| (Address)   |
| WANTAGH, NY 41793 11793-1962 (City/ State and Zip Code)   |
| (City/ State and Zip Code)  |
| dcicconE61 D6mil. com   |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Deborah Ciccone at 516-647-0510 (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:   |
| Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)  Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Street Address  |
| Amendment Section Amendment Section   |

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## **FLORIDA DEPARTMENT OF STATE Division of Corporations**

July 13, 2015

**DEBORAH CICCONE** 266 TWIN LANE EAST WANTAGH, NY 11793-1963 US

SUBJECT: OCEAN EAST CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N11000004802

We have received your document for OCEAN EAST CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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.

Carolyn Lewis

Regulatory Specialist 1

Letter Number: 515A00014525

lease Sec Corrected document attached. Thankyou!

## **Articles of Amendment**

to

**Articles of Incorporation** 

| Dean East Condominium Association, Fr   | 70 |
|---|----|
| (Name of Corporation as currently filed with the Florida Dept. of State)  |    |
| N11000004807-   |    |
| (Document Number of Corporation (if known)  |    |
| (Document number of Corporation (it known)  |    |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:  |    |
| A. If amending name, enter the new name of the corporation:   |    |
| 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)  |    |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Delray Beach, FL 33483   |    |
| 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:  Name of New Registered Agent: |    |
| 1108 Ocean TERR, APT 201, Delray Boh, F   | 7  |
| New Registered Office Address: 108 Ocean TERR, APT201  Delray Bch, Florida FL 33483  (Circ) (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 Resistered 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 I<br>V Mike<br>SV Sally S | <u>Iones</u>    |  |
|----------------------------------|-----------------------------------|-----------------|--|
| Type of Action (Check One)       | <u>Title</u><br>/                 | Name            | Address  |
| 1) Change Add                    | PP                                | John F. BALLARD | 800 N. MAGNOLIA AVE<br>Orlando, FL 32803       |
| Remove                           | CT                                | TOID 1, 100000) | 1100 00  |
| 2) Change Add Remove             | 3 <u>1D</u>                       | ERIC, WARREN    | 1108 Ocean Tark Apt HA<br>Delray Boh, FL 33482 |
| Remove  3) Change  Add           | PD.                               | Deborah Ciccore | 266 TWIN Lane East<br>WANTAGH, NY 11793        |
| Remove                           |                                   |                 |  |
| 4) Change Add                    | SD                                | CRAIG-BACHRODT  | 108 Ocean TERR APT 202 Delaw Bond 57 22182     |
| Remove                           | 1/+-                              | 1. n            | Delry Beach, FL 33483                          |
| 5) Change Add                    | YLD                               | LINDA RAPCIFFE  | 1108 Ocean TERR                                |
| Remove                           |                                   |                 | Delray Brach, FL 33482                         |
| 6) Change                        |                                   |                 |  |
| Add                              | ,                                 |                 |  |
| Remove                           |                                   | Dogs 2 of 4     | · · · · · · · · · · · · · · · · · · ·          |

|  | ets, if necessary). | (De specific                            | -)          |             |   |     |             |
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| date of each amendment(s) adopt                                    | ion:  | , if other than the   |
|--|---|---|
| this document was signed.  | 1/20/.  |   |
| ctive date <u>if applicable</u> :                                  | 4/30/15   | FILES  SECRETARY OF STATE  Universal of Connected Value   |
|  | (no more than 90 days after amendment file date)  | a MAISMA OF PORCESSIONA   |
|  |   | s, this uand 5111 blot Beltisulabla Sin G7  |
| ption of Amendment(s)  | ( <u>CHECK ONE</u> )  | ·   |
| The amendment(s) was/were adop was/were sufficient for approval.   | ed by the members and the number of votes cast for the  | amendment(s)  |
| There are no members or members adopted by the board of directors. | entitled to vote on the amendment(s). The amendment(  | s) was/were   |
| Dated  | 6 19 15   |   |
| Signature  | ), Cia  |   |
| have not been s  | elected, by an incorporator - if in the hands of a receiver   |   |
| D  |   |   |
|  | (Typed or printed name of person signing)   | <b>35</b> DIVI  |
| T  | resident, Director  | SCORETE INVISION OF COMMENT   |
|  | (Title of person signing)   | AH 9:   |
|  | this document was signed.  If the date inserted in this block of ment's effective date on the Depart option of Amendment(s)  The amendment(s) was/were adopt was/were sufficient for approval.  There are no members or members adopted by the board of directors.  Dated  Signature  (By the chairman have not been so ther court apport | this document was signed.  A 30 15  (no more than 90 days after amendment file date)  If the date inserted in this block does not meet the applicable statutory filing requirement ment's effective date on the Department of State's records.  Otion of Amendment(s)  (CHECK ONE)  The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.  There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors. |