11/20000/1136

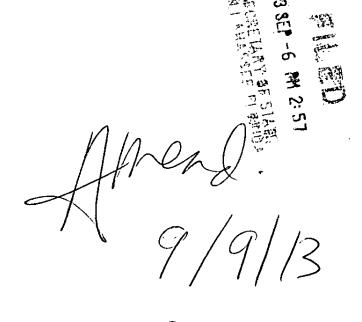
(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



300250069633

08/14/13--01021--010 **35.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 21, 2013

PASADENA POINTE I CONDOMINIUM ASSOCIATION, INC. ONE TAMPA CITY CENTER SUITE 2570 TAMPA, FL 33602

SUBJECT: PASADENA POINTE I CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N12000011136

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.

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

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.

Darlene Connell Regulatory Specialist II

Letter Number: 713A00019946

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Pasadena Pointe I andominium Association Inc The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person) berty Group
(Firm/Com Center Ste (City/ State and Zip Code) E-mail address/(to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person)

(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: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy 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

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation 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: 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) 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: (Florida street address) New Registered Office Address:

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 <math>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 V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name O	Address A.J. A. J.
1) X Change	<u>+</u>	Shah, Punit	One Tanga City Center Soute 2570
Add ·			TanpaFL 33602
2) Change	<u>VP</u>	Shah, Raxit	
AddRemove			
3) Change	<u>sec</u>	Shah, Ketki	
Remove			
4) Change			
Add Remove			
5) Change			
Add			
6) Change			
Add			
Remove			

	(Be specific)			
	<u>.</u>			
		<u></u>	· · · · · · · · · · · · · · · · · · ·	
				
	 .			
,				
·				
				
		 		
				<u> </u>
				

The date of each amen date this document was		if other than the		
Effective date if applic		n 90 days after amendment file da	tal	
	(no more man	1 90 days after amenament fite da	<i>ie)</i>	
Adoption of Amendme	ent(s) (<u>CHECK ON</u>	NE)		
The amendment(s) was/were sufficien		ers and the number of votes cast for	or the amendment(s)	
There are no membadopted by the boa		on the amendment(s). The amend	ment(s) was/were	
Dated	8/26/13	3		
Signature	Delal	$\overline{}$		
		an of the board, president or other corporator – if in the hands of a ro by that fiduciary)		
	Punit R	Shah		
	(Typed or printed na	ame of person signing)		
	(Title of p	person signing)		