

09/30/2015 17:34 FAX

Division of Corporations

LEOPOLD KORN LEOPOLD, P.A.

2001006

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : I20010000025
Phone : (786)699-2235
Fax Number : (305)935-9042

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: msosa@leopoldkorn.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
SUNWEST CC ASSOCIATION, INC.

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LEOPOLD KORN LEOPOLD SNY

002/006

COVER LETTER

H150002318973

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SUNWEST CC ASSOCIATION, INC.

DOCUMENT NUMBER: N14000001245

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

Please return all correspondence concerning this matter to the following:

Melissa Sosa, RE Paralegal

(Name of Contact Person)

Leopold Korn, P.A.

(Firm/ Company)

20801 Biscayne Blvd., Suite 501

(Address)

Aventura, FL 33180

(City/ State and Zip Code)

msosa@leopoldkorn.com

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

For further information concerning this matter, please call:

Melissa Sosa

786

899-2232

(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

H150002318973

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Articles of Amendment
to
Articles of Incorporation
of

15 SEP 30 AM 9:21

TALLAHASSEE, FLORIDA

SUNWEST CC ASSOCIATION, INC.

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

N14000001245

(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:

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)

1000 Sawgrass Corporate Parkway

Suite 110

Sunrise, FL 33323

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:

Leopold Korn, P.A.

20801 Biscayne Blvd., Suite 501

(Florida street address)

New Registered Office Address:

Aventura

(City)

Florida 33180

(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

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>D/P</u>	<u>DECASO, EDWARD</u>	<u>1001 Brickell Avenue</u>
<input type="checkbox"/> Add			<u>Suite 2210</u>
<input checked="" type="checkbox"/> Remove			<u>Miami, FL 33131</u>
2) <input type="checkbox"/> Change	<u>D/T</u>	<u>CHISENA, ANTHONY J</u>	<u>1001 Brickell Avenue</u>
<input type="checkbox"/> Add			<u>Suite 2210</u>
<input checked="" type="checkbox"/> Remove			<u>Miami, FL 33131</u>
3) <input type="checkbox"/> Change	<u>D/S</u>	<u>RIGUERO, ISIDORO</u>	<u>1001 Brickell Avenue</u>
<input type="checkbox"/> Add			<u>Suite 2210</u>
<input checked="" type="checkbox"/> Remove			<u>Miami, FL 33131</u>
4) <input type="checkbox"/> Change	<u>D/P</u>	<u>Perry, Craig</u>	<u>1000 Sawgrass Corporate Parkway</u>
<input checked="" type="checkbox"/> Add			<u>Suite 110</u>
<input type="checkbox"/> Remove			<u>Sunrise, FL 33323</u>
5) <input type="checkbox"/> Change	<u>D/VP</u>	<u>Moyers, Julie</u>	<u>1000 Sawgrass Corporate Parkway</u>
<input checked="" type="checkbox"/> Add			<u>Suite 110</u>
<input type="checkbox"/> Remove			<u>Sunrise, FL 33323</u>
6) <input type="checkbox"/> Change	<u>D/S</u>	<u>Govern, Michael</u>	<u>1000 Sawgrass Corporate Parkway</u>
<input checked="" type="checkbox"/> Add			<u>Suite 110</u>
<input type="checkbox"/> Remove			<u>Sunrise, FL 33323</u>

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

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The date of each amendment(s) adoption: September 18, 2015, 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

9/18/15

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)

Craig Perry

(Typed or printed name of person signing)

President

(Title of person signing)

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