# N15323

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Amend Mag. 9,14

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Village at	Blue Lake Condominium Association Inc.				
DOCUMENT NUMBER:	N15323				
The enclosed Articles of Amendment and fee are	e submitted for filing.				
Please return all correspondence concerning this	matter to the following:				
	Hillary Gillings				
	(Name of Contact Person)				
Blue C	Blue Crest Manangement LLC				
(Firm/ Company)					
2962 Trivium Circle, Ste 203					
	(Address)				
Dania Beach, FL 33312					
(City/ State and Zip Code)					
hillary@bluecrestmanagement.com  E-mail address: (to be used for future annual report notification)					
·	•				
For further information concerning this matter, please call:					
Hillary Gillings	at ( <u>954</u> ) 745-0899 (Area Code & Daytime Telephone Number)				
(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:					
■ \$35 Filing Fee □\$43.75 Filing F Certificate of St	ee & \$\subseteq\$\$\\$43.75 \text{ Filing Fee} & \$\subseteq\$\$\\$52.50 \text{ Filing Fee} \\ \text{Certified Copy} \\ \text{(Additional copy is enclosed)} \\ \text{Certified Copy} \\ \text{(Additional Copy is Enclosed)} \end{array}				
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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2014

HILLARY GILLINGS BLUE CREST MANAGEMENT LLC 2962 TRIVIUM CIRCLE - STE. 203 DANIA BEACH, FL 33312

SUBJECT: VILLAGE AT BLUE LAKE CONDOMINIUM ASSOCIATION, INC. C/O

BLUE CREST MANAGEMENT LLC

Ref. Number: N15323

We have received your document for VILLAGE AT BLUE LAKE CONDOMINIUM ASSOCIATION, INC. C/OBLUE CREST MANAGEMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 314A00017839

## Articles of Amendment , to Articles of Incorporation of

#### Village at Blue Lake Condominium Association, Inc.

(Name of Corporation as currently filed with the F		<u> </u>
N15	5323	
(Document Number of O	Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit Corp</i>	poration adopts the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>	
		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abb	oreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	Σ)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		· 102
		3 3
		<u></u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ame of the
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	(Florida street address)	_
The state of the s	D)	
(Cit)	, Florid	1a(Zip Code)
		(Esp Couc)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		ons of the position.
Signature of Ne	w 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>Mik</u>	n Doe se Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Jurandi Lima	3370 Beau Rivage Drive # H-2
X Add			Pompano Beach FL 33064
Remove			
2) Change	D	Karen Cooper	3370 Beau Rivage Drive # E-4
Add			Pompano Beach FL 33064
X Remove	5	Daywaa ad MaCaylay	2070 Bass Bissas Briss # F 4
3) Change	<u>D</u>	Raymond McCauley	3370 Beau Rivage Drive # E-1
Add			Pompano Beach FL 33064
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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Add			
Remove			

amending or adding additional Ar tach additional sheets, if necessary).	(Be specific)	,			
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The	date of each amendment(s) adoption: June 3rd, 2014	, if other than the	
aate	lune 3rd 2014		
Elle	(no more than 90 days after amendment file date)	<u> </u>	
Ado	option 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 7/31/2014		
	Signature Samaa aux	<del></del>	
	(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)		
	Tamara Corbin		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		