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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LOOKOUT BAY CONDO ASSOCIATION IN
DOCUMENT NUMBER: NV 323
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
DAVID GREENMAN (Name of Contact Person)
(Name of Contact Person)
LOOKOUT BAY CONDO ASSOC
(Firm/ Company)
6011 N. BAYSHORE DR 413
(Address)
MIAMI, FL 33137 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-man address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1) avid Greenman at (561) 400 3653
(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 U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$\begin{array}{cccccccccccccccccccccccccccccccccccc
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

Articles of Amendment

, ·	Articles of l	ncorporation		چاکاری
_		of		
LOUKOUT BAY		ASSOCIATIO	N INDE	The state of the s
(Name of Corporation as current)		Dept. of State)		- ひ (^{**})
$\mathcal{N}_{\mathcal{N}}$	0323			The same
(Documen	t Number of Corporation	(if known)	r.	e.
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporat		is <i>Florida Not For Profit Corpo</i>	ration adopts the following	lawing
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and contain "Company" or "Co." may not be used in		or "incorporated" or the abbre		ne new 'Inc."
B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A ST</u>	f applicable: TREET ADDRESS) ——			
C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST C</u>	eable: DFFICE BOX			
D. If amending the registered agent and	l/or registered office ad	dress in Florida, enter the nan	ne of the	
new registered agent and/or the new				
Name of New Registered Agent:	DAUID C	DREENMAN		
	6011 N.	BAYSHORE C)r_#3	
New Registered Office Address:		da street address)		
	MIAML (City)	, Florida (Zip C	33137 (ode)	_
New Registered Agent's Signature, if ch	anging Registered Age			
I hereby accept the appointment as registe			s of the position.	
Sigi	nature of New Registered	Agent, if changing		

Page 1 of 4

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	<u>PT</u>	John Doe	
_			
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>T</u>	ROBERT JOHN GRABOSKI	GOUN. BAYSHOREDL #9
2) Change Add Remove	_5	GAIL MEADOWS	GOUN. BAYSHORE DR HY MIAM L. PL 33137.
Change Add Remove	工	David Greenman	MIRMI, FL 33137
4) Change Add Remove			
5) Change Add Remove		<u> </u>	
6) Change Add Remove		 .	

utach additional sheets, if necessary).	(Be specific)
<u> </u>	
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The date of each amendment(s) adop	tion: 9.01.1 C
Effective date <u>if applicable</u> :	4.21.12
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop was/were sufficient for approval.	sted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors	s entitled to vote on the amendment(s). The amendment(s) was/were
Dated Signature	1.29.12
(By the chairman have not been	on or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
Dovid	Greenman
(T	yped or printed name of person signing)
(Title of person signing)