## N10755

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Amend

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Pine Hollow Condominium Association, Inc.
DOCUMENT NUMBER: N16755
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mara Alyson
(Name of Contact Person)
Kirschbaum and Alyson, LLC
(Firm/ Company)
8461 lake Worth Road, Suite 214
(Address)
Wellington, Florida 33467
(City/ State and Zip Code)
mara@KAPropertyLaw.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mara Alyson at ( 561 ) 337-1510
(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  Certificate of Status  Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$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



November 21, 2011

MARA ALYSON KIRSCHBAUM AND ALYSON, LLC 8461 LAKE WORTH ROAD - SUITE 214 WELLINGTON, FL 33467

SUBJECT: PINE HOLLOW CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N16755

We have received your document for PINE HOLLOW CONDOMINIUM ASSOCIATION, INC. 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 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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 211A00026290

## **Articles of Amendment** Articles of Incorporation

•		Amendment		<b>.</b> .
	-	o ncorporation		0/450
		of	?	1 0 0 75 /1
Pine Hollow Condominium Association.	Inc			
		filed with the Florida D	ept. of State)	
N16755				1 1/6 A
	t Number of Corpor	ation (if known)		- ×./_
Pursuant to the provisions of section 617. collowing amendment(s) to its Articles of		es, this <i>Florida Not For I</i>	Profit Corporation adopts the	OL STORESTORS TO THE STORE STORESTORS TO THE STO
A. If amending name, enter the new na	me of the corporat	ion:		
The new name must be distinguishable an "Corp." or " Inc." <u>"Company" or "Co."</u>			orated" or the abbreviation	<del></del> n
B. Enter new principal office address,	if applicable:	Pine Hollow c/o Kirsch	baum and Alyson	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		8461 Lake Worth Road.	Suite 214	_
		Wellington, Florida 334	67	<u> </u>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (				_
). If amending the registered agent an new registered agent and/or the new			ter the name of the	
Name of New Registered Agent:	Kirschbaum and A	lyson Law Group, LLC	<del></del> -	
New Registered Office Address:	8461 Lake Worth F	Road, Suite 214 (Florida street address)		
	Wellington		, Florida <u>33467</u>	
		(City)	(Zip Code)	
iew Registered Agent's Signature, if che hereby accept the appointment as registe			obligations of the position	ı.
	0.00	$\sim$		
Sign	nature of New Regist	tered Agent, if changing		

Page 1 of 4

## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	1ee1.)	Name		<u>Address</u>	
1)					-
					-
2)					•
					•
3)					
4)			_		•
<b>-</b> )					
5)					
			_		-
6)					-
If REMOVI	NG an office	r and/or director, please list the	e title(s) and na	ne of the officer/director to be remove	<u>d;</u>
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>	
1)	<u>.                                 </u>		4)		
2)	<del></del>		5)	,	
3)			6)		

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
<u> </u>		
		-
		,
<del></del>		<del></del>

Effe	ctive date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Adoj	ption 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.	
Ø	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 November 30, 2011	
	Signature	<u>_</u>
	(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)	
	Chris Stewart	
	(Typed or printed name of person signing)	
	DP	
	(Title of person signing)	

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