

N17000012699

**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 : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (800) 345-4647
Fax Number : (800) 432-3622

S TALLENT

MAR 20 2018

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
THE BRISTOL PALM BEACH CONDOMINIUM
ASSOCIATION, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$43.75

*****PLEASE GIVE THE ORIGINAL SUBMISSION DATE
AS THE FILE DATE - 3/16/18*******

Amend



March 19, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations
THE BRISTOL PALM BEACH CONDOMINIUM ASSOCIATION, INC.
440 ROYAL PALM, STE. 100
PALM BEACH, FL. 33480

SUBJECT: THE BRISTOL PALM BEACH CONDOMINIUM ASSOCIATION, INC.
REF: N17000012699

*****PLEASE GIVE THE ORIGINAL SUBMISSION DATE
AS THE FILE DATE - 3/16/18*******

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Susan Tallent
Regulatory Specialist II

FAX And. #: H18000086426
Letter Number: 618A00005446

RECEIVED
18 MAR 19 AM 7:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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Articles of Amendment
to
Articles of Incorporation
of

THE BRISTOL PALM BEACH CONDOMINIUM ASSOCIATION, INC.

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

N17000012699

(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)

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:

(City)

Florida

(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

FILED

18 MAR 15 AM 7:52

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

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	P	ADELSON, ALLAN R	440 ROYAL PALM, STE. 100
<input type="checkbox"/> Add			PALM BEACH, FL 33480
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	DVP	NEWMAN, MICHAEL	440 ROYAL PALM, STE. 100
<input type="checkbox"/> Add			PALM BEACH, FL 33480
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	DST	GOLUB, LEE	440 ROYAL PALM, STE. 100
<input type="checkbox"/> Add			PALM BEACH, FL 33480
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	VP	GOLUB, EUGENE	440 ROYAL PALM, STE. 100
<input checked="" type="checkbox"/> Add			PALM BEACH, FL 33480
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	S	AZOUT, JACK	440 ROYAL PALM, STE. 100
<input checked="" type="checkbox"/> Add			PALM BEACH, FL 33480
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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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: _____, if other than the date this document was signed.

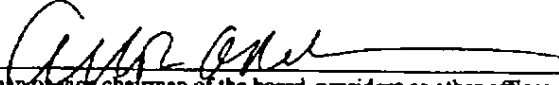
Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 3/15/18 _____

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)

Allan R Adelson

(Typed or printed name of person signing)

President

(Title of person signing)