N18055

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PICK-UP WAIT MAIL
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02/24/20--01034--015 **35.00

Amend

MAR 1 4 2028 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 160 CENTIER CONDOMINIUM ASSOCIATION, I	NC
DOCUMENT NUMBER: N 18055	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JOHN G. SALATINO (Name of Contact Person)	
160 CENTER CONDUITINUM ASSOCIATION, INC (Firm/ Company)	
4452 ST ANDREWS DR (Address)	
BOYNTON BCH FLA 33436 (City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
(Name of Contact Person) at 561 - 703-4424 (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$\$\$\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$\Bigcup \\$43.75 Filing Fee & Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	nt(s) to its Articles of Incorporation:			
A. If ame	ending name, enter the new name of the co	orporation:	. 1/2	
		/	<u>V/,4</u>	The n
	t be distinguishable and contain the word "c y" or "Co." may not be used in the name.	orporation" or "incorp	porated" or the abbi	eviation "Corp." or "Inc
	new principal office address, if applicable	. <i>N/9</i>	9	
	office address MUST BE A STREET ADL			
				- E
				——————————————————————————————————————
C. Enter	new mailing address, if applicable:	KI/A		B 2
(Maili	ng address <u>MAY BE A POST OFFICE BO</u>	\underline{x}) $\underline{-70/7/}$	_ _	
				·
				
	ending the registered agent and/or register		lorida, enter the na	me of the
new r	egistered agent and/or the new registered	omce address:		
	Name of New Registered Agent:			
	New Projectory LOGG at Addresses		(Florida street add	vss)
	New Registered Office Address:			
	_	(63)		_, Florida (Zip Code)
		(City)		(Zip Code)

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	PT John I V Mike SV Sally	Jones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) _X Change Add	<u>VD</u>	VALERIE R. SALATINO	4452 ST ANDREWS DR. BOYNTON BUH Fir 33436
Remove 2) Change Add		_	900 E. Arlantic AUE SUMED DERAAY BOH FLA 33483
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove E. If amending or additional she		Page 2 of 4 rticles, enter change(s) here: (Be specific)	
		N/A	<u>. </u>
	_		

		<u> </u>
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	Page 3 of 4	
The date of each amendment(s) adoption:date this document was signed. Effective date if applicable:	2-20-20	, if other than the
date this document was signed.	2 2 13	
Effective date if applicable:	d-20-20	1
Note: If the date inserted in this block does no document's effective date on the Department o	t meet the applicable statutory filing require f State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by t was/were sufficient for approval.	he members and the number of votes cast fo	r the amendment(s)

•

Dated 2-20-20
Signature July Malatine
(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 count appointed fiduciary by that fiduciary)
JOHN G. SALATINO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.