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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name :

: FORSYTH & BRUGGER, P.A.

Account Number : I20040000147

: (239)263-6000

Phone Fax Number

: (239)263-6757

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Email Address:

andysmith603@me.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
THE RESIDENCES AT THE 275 BUILDING CONDOMINIUM ASSOC

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ENCES AT THE 275 BUILD	ING COND	OMINTUM ASSO	OCIATION,	INC	-
DOCUMENT NUMBER: N19000011475	<u> </u>					
The enclosed Articles of Amendment and fee:	are submitted for filing.			<u></u>		_
Please return all correspondence concerning th	is matter to the following:					
ANDREW SMITH						
	(Name of Contact Per	rson)		 .	•	-
	(Firm/ Company))				-
990 1ST AVE S., STE 200	,					
	(Address)			 -		•
NAPLES FL 34102						
	(City/ State and Zip C	Code)			2022	
andysmith603@me.com				<u>. </u>	9NV	:==
E-mail address: (to	be used for future annual repo	ort notification	oa)		-85-	, TT
For further information concerning this matter,	please call;			5.7 €0.71 €1.71	2	; sam
Andrew Smith	at	239	595-7498		=	
(Name of Contact		(Area Code)	(Daytime Telep	phone Numb	er)O	
Enclosed is a check for the following amount n	nade payable to the Florida D	epartment of	State:			
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S		Certii Certii (Addi	0 Filing Fee ficate of Status fied Copy stional Copy is osed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ame Divi	et Address endment Section of Corp	orations			

O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

THE RESIDENCES AT THE 275 BUILDING CON	ADOVIMION ASSO	CIATION, INC		
Name of Corporation as currently filed with the l N19000011475	tlorida Dept. of Stat	<u>e</u>)		
(Docume)	nt Number of Corpor	ation (if known)		
Pursuant to the provisions of section 617.1006, Florid unendment(s) to its Articles of Incorporation:			pration adopts the	e following
L. If amending name, enter the new name of the c	orporation:			
came must be distinguishable and contain the word " (Company" or "Co." may not be used in the name.		orporated" or the abbre	rviation "Corp."	_The new or "Inc."
 Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADJ</u> 	DRESS)			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>			-
				20
		<u> </u>		22 /
. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in office address:	Florida, enter the nam	e of the	/JUG 30
Name of New Registered Agent:			NSS I	A
New Registered Office Address:		(Fiorida street address) <u> </u>	11: 59
	(City)		Florida	
Devictored Laurel Ci.			(Zip Code)	
w Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent: am familiar with and	l accept the obligations (of the position.	
<u>. </u>		_		
	Signature of Nev	Registered Agent, if ch	anging	

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>D</u>	SMITH, LESLEY	990 1ST AVE S., STE 200 NAPLES FL 34102
2) Change Add	D	VAN METER, WILLIAM B.	275 8TH ST S., UNIT 301 NAPLES FL 34102
Remove 3) Change Add Remove			10 30 T
4) Change Add			SEC
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or adding (attach additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	

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	_			_		
The date of each amendment(s) adoption date this document was signed.	ı:		 .	, i	f other th	an the
Effective date if applicable:						
	no more than 90 days a					
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable at of State's records.	e statutory filing requ	pirements, this date v	vill not be li	isted as ti	he
Adoption of Amendment(s)	(CHECK ONE)					
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the	number of votes cast	t for the amendment	(s)		

here are no members or compare opitied to come and
here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
, y y y y
8/29/2022
Dated
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)
ANDREW SMITH
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)