## Florida Department of Stafe Division of Corporations Electronia Filing Cover Sheet

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

| Certificate of Status | 0       |
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J. HORNE

SEP - 9 2022

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## **COVER LETTER**

| TO; | Amendr   | ient Se | ction   |     |
|-----|----------|---------|---------|-----|
|     | Division | of Con  | poratio | O.S |

| NAME OF CORPORATI            | THE RESIDENCES                              | AT THE 275 BUILDI  | NG CONDO  | OMINIUM ASSOCIATION, INC                                      |
|------------------------------|---|--|---|---|
| DOCUMENT NUMBER:             | N19000011475                                |  |   |   |
| The enclosed Articles of Ar  | mendment and fee are sub-                   | nitted for filing.   |   |   |
| Please return all correspond | lence concerning this matte                 | er to the following:   |   |   |
| ANDREW SMITH                 |   |  |   |   |
|                              |   | (Name of Contact Pers  | ion)  |   |
|                              |   | (Firm/ Company)  |   |   |
| 990 1ST AVE S., STE 207      |   |  |   |   |
|                              |   | (Address)  |   |   |
| NAPLES FL 34102              |   |  |   |   |
|                              | <del>-</del>                                | (City/ State and Zip Co  | ode)  |   |
| andysmith603@me.com          | ÷   |  |   |   |
| 1                            | e-mail address: (to be used                 | for future annual repor  | t notification  | 0)  |
| For further information con  | cerning this matter, please                 | call:  |   |   |
| Andrew Smith                 |   | 2  | 39  | 595-7498  |
|                              | (Name of Contact Person)                    |  | Area Code)  | (Daytime Telephone Number)                                    |
| Enclosed is a check for the  | following amount made pa                    | yable to the Florida De  | partment of   | State:  |
| <b>■ \$</b> 35 Filing Fee    | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certifi<br>Certifi  | D Filing Fee icate of Status ied Copy is iconal Copy is seed) |
| Division of P.O. Box         | ent Section<br>of Corporations              | Amer<br>Divis<br>The G   | t Address<br>idment Section of Corpo<br>Centre of T.<br>N. Monroe | prations  |

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



THE RESIDENCES AT THE 275 BUILDING CONDOMINIUM ASSOCIATION, INC.

| (Name of Corporation as currently filed with the Flori   | ida Dept. of State)  |
|--|--|
| N19000011475   |  |
| (Document N  | umber of Corporation (if known)  |
| Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:                       | tatutes, this Florida Not For Profit Corporation adopts the following  |
| A. If amending name, enter the new name of the corp  | oration:   |
|  | The new  |
| name must be distinguishable and contain the word "corp<br>"Company" or "Co." may not be used in the name.                     | poration" or "incorporated" or the abbreviation "Corp." or "Inc."      |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE                         | ESS)   |
|  |  |
|  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |  |
|  |  |
|  |  |
| D. If aypanding the registered senset and/or registered  |  |
| <ul> <li>If amending the registered agent and/or registered<br/>new registered agent and/or the new registered offi</li> </ul> | ce address:  |
| Name of New Registered Agent:  | · .  |
|  |  |
| New Registered Office Address:   | (Florida street address)   |
| New Registerea Office Address:   |  |
| · <del></del>  | (City) Florida (City)  |
|  |  |
| New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an                  | red Agent: n familiar with and accept the obligations of the position. |
| <del></del>  | Signature of New Registered Agent, if changing                         |

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 A Add                  | <u>v</u> <u>y</u>             | ohn Doe<br>fike Jones<br>ally Smith                  |  |
|---|-------------------------------|--|--|
| Type of Action<br>(Check One)                     | <u>Title</u>                  | <u>Name</u>  | Address                                    |
| 1) Change Add                                     | Ď                             | BRUGGER, JOHN  | 600 5TH AVE S., STE 207<br>NAPLES FL 34102 |
| Remove  |                               |  |  |
| 2) Change Add                                     |                               | · · · · · · · · · · · · · · · · · · ·                |  |
| Remove 3) Change Add Remove                       |                               |  |  |
| 4) Change Add                                     | ·                             |  |  |
| Remove  |                               |  |  |
| 5) Change Add                                     |                               |  |  |
| Remove  |                               |  |  |
| <ul><li>δ) Change</li><li> Add</li></ul>          |                               |  |  |
| Remove  |                               | · · · · · · · · · · · · · · · · · · ·                |  |
| E. If amending or adding (attach additional sheet | g additiona<br>is, if necessa | l Articles, enter change(s) here; ry). (Be specific) |  |
|   |                               |  |  |
| <u> </u>  |                               |  | · · · · · · · · · · · · · · · · · · ·      |
|   |                               |  | ·  |
|   |                               |  | •  |

|   | fine more party                       | >> was a see amena  | mem jue uutej    |                                       | t be listed as the                    |
|---|---------------------------------------|---------------------|------------------|---------------------------------------|---------------------------------------|
| Effective date <u>if applicable</u> :                                     | (no more than                         | 90 days after amend | Imant file date) | <del></del>                           |                                       |
| The date of each amendment(s) adoption the date this document was signed. | ហ៍០ព:                                 |                     |                  |                                       | , if other than the                   |
|   |                                       |                     |                  |                                       |                                       |
|   |                                       |                     |                  |                                       |                                       |
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|   |                                       |                     |                  |                                       |                                       |
|   |                                       | ·                   |                  | <del></del>                           | <del></del>                           |

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

| here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.   |
|--|
| 9/7/2022 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)  |