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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer. |
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## COVER LETTER

| TO: Amendment | Section |
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Division of Corporations

# 1116 TRUMAN ACENUE CONDOMINIUM ASSOCIATION INC. NAME OF CORPORATION:

|                  | N2300002850 |
|------------------|-------------|
| DOCUMENT NUMBER: |             |

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

#### ROBYN KELLEY

(Name of Contact Person)

1116 TRUMAN ACENUE CONDOMINIUM ASSOCIATION INC.

(Firm/ Company)

(Address)

### 828 WHITE ST STE 3

KEY WEST, FL 33040

(City/ State and Zip Code)

## RKELLEY@IFIXANDREPAIR.COM

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

| ROBYN KELLEY |                          |    | 561         | 529-4502                   |
|--------------|--------------------------|----|-------------|----------------------------|
|              |                          | at |             |                            |
|              | (Name of Contact Person) |    | (Area Code) | (Daytime Telephone Number) |

(Mark of Contact (Cloud) (Meta Code) (Dayance (Clephone))

Enclosed is a check for the following amount made payable to the Florida Department of State:

| S35 Filing Fee | □\$43.75 Filing Fee &<br>Certificate of Status | S43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | S52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|----------------|--|---|--|
| Mailing A      | ddress   | Street 4  | Address  |
| Amendme        | nt Section                                     | Amend   | ment Section   |
| Division o     | f Corporations                                 | Divisio   | n of Corporations  |
| P.O. Box (     | 327  | Clifton   | Building   |
| Tallahasse     | e, FL 32314                                    | 2661 E.   | xecutive Center Circle   |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## 1116 TRUMAN ACENUE CONDOMINIUM ASSOCIATION INC.

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

N2300002850

(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:

| name must be distinguishable and contain the word   |         | ion" or "incorporated" or the abbreviation | "Corp." ( | _The ne<br>or "Inc. |             |
|---|---------|--|-----------|---------------------|-------------|
| "Company" or "Co." may not be used in the name<br>B. Enter new principal office address, if applica   | -       | 828 WHITE ST                               |           | 5                   |             |
| (Principal office address <u>MUST BE A STREET A</u>   |         | STE 3                                      |           | <u></u>             |             |
| C. <u>Enter new mailing address, if applicable:</u><br>(Mailing address <u>MAY BE A POST OFFICE I</u> |         | KEY WEST, FL 33040                         | ':        | C)                  | -<br>-<br>- |
|   | BOX)    | 828 WHITE ST                               |           | :<br>::<br>::       |             |
|   |         | STE 3                                      |           | ÷                   | _           |
|   |         | KEY WEST, FL 33040                         |           |                     | _           |
| D. <u>If amending the registered agent and/or registered agent and/or the new registered</u>          |         |  |           |                     |             |
| Name_of_New Registered Agent:   | ROBYN I | KELLEY                                     |           |                     | -           |
|   | 828 WHE | TE ST STE 3                                |           |                     |             |

<u>New Registered Office Address:</u>

KEY WEST (City)

Florida 33040

(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

(Florida street address)

Page 1 of 4

## and the second

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:<br><u>X</u> Change<br><u>X</u> Remove<br><u>X</u> Add | <u>PT</u> <u>John I</u><br><u>V</u> <u>Mike</u><br><u>SV</u> Sally S | Jones              |                      |
|--|--|--------------------|----------------------|
| <u>Type of Action</u><br>(Check One)                           | <u>Title</u>   | Name               | <u>Addres</u> s      |
| 1) Change  | DP   | SCOTT ZURBRIGEN    | 217 ENEAS LN         |
| Add  |  |                    | KEY WEST, FL 33040   |
| X Remove   |  |                    |                      |
| 2) Change  | DVP  | GARY CREWE         | 1609 SEMINARY STREET |
| Add  |  |                    | KEY WEST, FL 33040   |
| X Remove   |  |                    |                      |
| 3) Change  | DS   | PAULA CREWE        | 1609 SEMINARY STREET |
| Add  |  |                    | KEY WEST, FL 33040   |
| X Remove   |  |                    |                      |
| 4) Change  | T  | CAROLINA ZURBRIGEN | 1609 SEMINARY STREET |
| Add  |  |                    | KEY WEST, FL 33040   |
| X Remove   |  |                    |                      |
| 5) Change  | PRES   | CHRISTOPHER KELLEY | 828 WHITE ST         |
| X Add  |  |                    | STE 3                |
| Remove   |  |                    | KEY WEST, FL 33040   |
| 6) Change  | VP   | GUY MEDBERY        | 1116 TRUMAN AVE      |
| X Add  |  |                    | UNIT 3               |
| Remove   |  |                    | KEY WEST, FL 33040   |
|  |  | Page 2 of 4        |                      |

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:<br><u>X</u> Change<br><u>X</u> Remove<br><u>X</u> Add | <u>V</u>     | J <u>ohn Doe</u><br><u>Mike Jones</u><br>Sally Smith |                    |
|--|--------------|--|--------------------|
| <u>Type of Action</u><br>(Check One)                           | <u>Title</u> | <u>Name</u>  | <u>Addres</u> s    |
| I) Change  | Т            | ROBYN KELLEY   | 828 WHITE ST       |
| X Add  |              |  | STE 3              |
| Remove   |              |  | KEY WEST, FL 33040 |
| 2) Change  |              |  |                    |
| Add  |              |  |                    |
| Remove   |              |  |                    |
| 3 ) Change   |              |  |                    |
| Add  |              |  |                    |
| Remove   |              |  |                    |
| 4) Change  |              |  |                    |
| Add  |              |  |                    |
| Remove   |              |  |                    |
| 5) Change  |              |  |                    |
| Add  |              |  |                    |
| Remove   |              |  |                    |
| б) Change  |              |  | <u></u> _          |
| Add  |              |  |                    |
| Remove   |              | Page 2 of 4  |                    |

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (attach additional sheets, if necessary). (Be specific)

|          | N/A       |                                       |  |
|----------|-----------|---------------------------------------|--|
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#### • • , •

The date of each amendment(s) adoption: \_\_\_\_\_\_, if other than the date this document was signed.

Effective date <u>if applicable</u>:

(no more than 90 days after amendment file date)

<u>Note:</u> 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.

10/07/2024 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)

CHRISTOPHER KELLEY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

. . . .

THE UNDERSIGNED HEREBY CERTIFY that the undersigned is the Manager of 2024 JLB AND ASSOC KEY WEST, LLC, a Florida limited liability company the developer pursuant to that certain Declaration of Protective Covenants, Restrictions and Easements of 1116 Truman Avenue Condominium, a Condominium pursuant to that certain Declaration of Condominium recorded in Official Records Book 3277, Page 777 Public Records of Monroe County, Florida. (the "Declaration").

## **RESOLVED:**

- 1. As of the date of this Resolution all of the residential units at 1116 Truman Avenue Condominium have been conveyed and the Developer desires to turn over control of the Association.
- 2. At a duly held meeting of the Association, on <u>817-24</u> the Association chose to elect the following members to the Board of Directors of 1116 TRUMAN AVE CONDOMINIUM, INC., a Florida not-for-profit corporation.
- 3. The following shall constitute the initial Board of Directors for 1116 TRUMAN AVE CONDOMINIUM, INC., which term shall run until 9.27 25

| PRESIDENT:      | Cheistophie L. Keney |
|-----------------|----------------------|
| VICE PRESIDENT: | GUY MEDBERY          |
| SECRETARY:      | Robyn L. Kelley      |
| TREASURER:      | Robyn L. Kellen      |

THE UNDERSIGNED HEREBY FURTHER CERTIFIES that the foregoing is a true and complete copy of the resolutions duly adopted at the meeting of all of the Association; that said resolution has not been in anyway modified, amended, rescinded or annulled and is now in full force and effect; that the resolution has been entered upon the minute book of the Association; and, that the resolution is in conformity with and is not contrary to or in conflict with any provision of the By Laws and Articles of incorporation of 1116 TRUMAN AVENUE CONDOMINIUM ASSOCIATION, INC., a Florida not-forprofit corporation.

THE UNDERSIGNED HEREBY FURTHER CERTIFY that all of the following persons are now acting on behalf of the Company in the capacities set forth below and that the signatures set opposite their names are their genuine signatures:

| Name and Title  | Signature |
|-----------------|-----------|
| PRESIDENT:      |           |
| VICE PRESIDENT: | Jun M. M. |
| SECRETARY:      | ALT       |
|                 |           |

Resolution of Developer Control - 1116 Truman Ave

TREASURER: IN WITNESS WHEREOF, the undersigned have hereunto subscribed his/her/its/their name and affixed his seal this 27th Cuy of Manual :

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.. .

JLB AND ASSOC KEY WEST, LLC, a Florida limited liability company.

By: \_\_\_\_\_\_ Gregory S. Oropeza, as Special Manager