## N26734

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ndominium Associa	ation, Inc		
N26734				
DOCUMENT NUMBER:		····	· <del>_</del>	
The enclosed Articles of Amendment and fee	are submitted for fil	ling.		
Please return all correspondence concerning the	nis matter to the foll	owing:		
Patricia Hall				
	(Name of C	Contact Person)		
Overlook Condominium Association, Inc				
	(Firm/	Company)		•
1167 Hillsboro Mile				
	(Ac	idress)		
Hillsboro Beach, FL 33062				
	(City/ State	and Zip Code)		
patriciahishon@aol.com				
E-mail address: (to	be used for future a	nnual report notificat	ion)	
For further information concerning this matter	, please call:			
Patricia Hall		954 at	4272878	
(Name of Contact	Person)		e) (Daytime Telephone Numb	per)
Enclosed is a check for the following amount	made payable to the	e Florida Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Certified	Copy Cer nal copy is Cer (Ac	t.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	
Mailing Address		Street Addres	<u>5</u>	

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

FILED

		7021440-00-	·
(Name of Corporation as currently filed with the Flori	da Dept. of State)	2021 MAR 22 PI	# 2:39
N26734			
(Document N	umber of Corporation	SECRETY OF (If known) LLAHASSE	E, FL
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida N</i>	ot For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corp	oration:		
		<del></del>	The new
name must be distinguishable and contain the word "corp" (Company" or "Co." may not be used in the name.	ooration" or "incorp	orated" or the abbreviation	i "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>		
		W-M-L	
	·	<del></del>	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		orida, enter the name of t	<u>he</u>
Name of New Registered Agent:	<del></del>	<u></u>	
	10000	(Florida street address)	
New Registered Office Address:		(a for the street district)	
		. Florid	da
<del></del>	(City)	(Zi <sub>I</sub>	da o Code)
New Registered Agent's Signature, if changing Registal hereby accept the appointment as registered agent. I a	e <mark>red Agent:</mark> m familiar with and a	eccept the obligations of the	e position.
<del> </del>	Signature of New I	Registered Agent, if changi	ng

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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change Add	<u>T</u>	_	Kodz, Melinda	1167 Hillsboro Mile #409 Hillsboro Beach, FL 33062
<ul> <li>X Remove</li> <li>2) Change</li> <li>X Add</li> </ul>	<u>T</u>	_	Shore, Howard	1167 Hillsboro Mile #406 Hillsboro Beach, Fl 33062
Remove	<u>VP</u>	_	Antapasis, Margaret	1167 Hillsboro Mile #404 Hillsboro Beach, FL 33062
4) Change Add	VP	<del>_</del> -	Hudson, Shane	Hillsboro Beach, FL 33062
Remove  5) Change     Add     Remove		_		
6) Change Add		_		
E. If amending or addin (attach additional shee			cles, enter change(s) here: (Be specific)	
		_		

	<del>-</del>
	<del></del>
	<del></del>
	<del></del>
	. <del></del>
The date of each amendment(s) adoption: March 15, 2021	, if other than the
date this document was signed.	
March 15, 2021	
Effective date if applicable:  (no more than 90 days after amendment file date)	
(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 no	ot 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.

rs	March 15, 2021
Dated	
Signatu	
Č	(By the 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)
	Patricia Hall
	(Typed or printed name of person signing)

(Title of person signing)