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| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nan | ne) |
| (Doc | cument Number) | · · · · · · · · · · · · · · · · · · · |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | Filing Officer: | |
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MAR 0 5 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section **Division of Corporations**

| Division of Corporations | | | | |
|---|-----------------------------------|--|--|--|
| NAME OF CORPORATION: Sheffield ' | 'Q" Condon | ninium Assoc, Inc | | |
| DOCUMENT NUMBER: N38780 | | | | |
| The enclosed Articles of Amendment and fee are subm | nitted for filing. | | | |
| Please return all correspondence concerning this matter | r to the following: | | | |
| Alex Laschiver, Secretar | ٢٧ | | | |
| | (Name of Contact Person | 1) | | |
| Sheffield "Q" Condominio | um Associa | tion, Inc | | |
| | (Firm/ Company) | | | |
| 14111 Paradise Point Ro | | | | |
| | (Address) | | | |
| Palm Beach Gardens, Fl | Palm Beach Gardens, Florida 33410 | | | |
| (City/ State and Zip Code) | | | | |
| alexlasch@hotmail.com | | | | |
| E-mail address: (to be used | for future annual report | notification) | | |
| For further information concerning this matter, please of | call: | | | |
| Alex Laschiver | _{at} 609 | 417-5387 | | |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount made pay | vable to the Florida Depa | urtment of State: | | |
| \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status | _ | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) | | |
| Mailing Address Amendment Section Division of Corporations | Amend Divisio | Address Iment Section on of Corporations | | |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

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14 MAR -3 AM 9: 46

Sheffield "Q" Condominium Association, Inc

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| N38780 | y med with the 1 | ortua Dept. or State) | TALLAHA | SSEE, F |
|---|---------------------|---------------------------------|----------------------------------|-----------------------|
| | ument Number of (| Corporation (if known) | | |
| Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate | | tes, this <i>Florida Not Fo</i> | Profit Corporation adopts the | followin |
| A. <u>If amending name, enter the new na</u> N/A | me of the corpora | tion: | | |
| name must be distinguishable and contain "Company" or "Co," may not be used in | | ation" or "incorporated | " or the abbreviation "Corp." o | _The new or "Inc." |
| B. Enter new principal office address, (Principal office address <u>MUST BE A S</u> | | 2) 14111 Parad | ise Point Rd | |
| | | | Gardens, Fl 33410 | • |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | Sheffield "Q" c/c | Seacrest Services Inc. | |
| | | 2400 Centrepark W Dr #175 | | |
| | | West Palm E | Beach, Fl 33417 | |
| D. If amending the registered agent an new registered agent and/or the new | v registered office | address: | enter the name of the | |
| Name of New Registered Agent: | Alex Laschiver | | | |
| | 14111 Par | adise Point Ro | <u> </u> | |
| New Registered Office Address: | | (Florida street address) | 00440 | |
| | | ch Gardens | , Florida 33410 | |
| | (Cit) | " | (Zip Code) | i |
| New Registered Agent's Signature, if cl I hereby accept the appointment as regist | ered agent. Al am f | | the obligations of the position. | |
| _ | | v Registered Agent, if ch | anging | |

Page 1 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: X Change | <u>PT</u> | John Doe | |
|-------------------------------|-----------|----------------|-------------------------|
| X Remove | ¥ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | Р | Tim Tucciarone | 412 Sheffield Q |
| Add | | | WPB, Florida 33417 |
| Remove | | | |
| 2) Change | V | Alice Chandler | 410 Sheffield Q |
| Add | | | WPB, Florida 33417 |
| Remove | | | |
| 3) Change | D | Ernest M Marsh | 421 Sheffield Q |
| ✓ Add | | | WPB, Florida 33417 |
| Remove | | | |
| 4) Change | D | Joel Frankfurt | 413 Sheffield Q |
| √ Add | | | WPB, Florida 33417 |
| Remove | | | |
| 5) Change | PS | Alex Laschiver | 14111 Paradise Point Rd |
| Add | | | Palm Beach Gardens |
| Remove | | | Florida, 33410 |
| Change | D | Ed Santiago | 403 Sheffield Q |
| Add | | | WPB, Florida 33417 |
| Remove | | | |
| | | | |

| | The date of each amendment(s) adoption: February 07, 2014 date this document was signed. | | |
|------|--|---|-------------|
| Effe | ctive date <u>if applicable</u> : | , | |
| | | (no more than 90 days after amendment file date) | |
| Add | ption of Amendment(s) | (CHECK ONE) | |
| | The amendment(s) was/were was/were sufficient for approx | adopted by the members and the number of votes cast for the amendment(s) val. | |
| | There are no members or men adopted by the board of direc | mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors. | |
| | Dated Febru | ary 27, 2014 | |
| | Signature | y fasclivur | |
| | (By the cha have not b | nirman or vice chairman of the board, president or other officer-if directors seen selected, by an incorporator – if in the hands of a receiver, trustee, or t appointed fiduciary by that fiduciary) | |
| | Alex Laso | chiver | |
| | | (Typed or printed name of person signing) | |
| | President | :/secretary | |
| | | (Title of person signing) | |

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