

N9500004111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

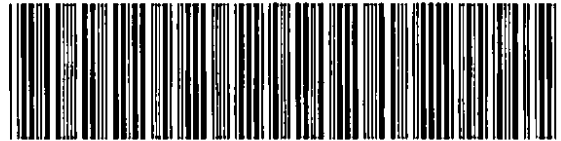
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FILED

2018 JUN 18 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. GOLDEN

JUN 21 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VILLA VIZCAYA Property Owners Association, Jr

DOCUMENT NUMBER: N95000004111

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

Please return all correspondence concerning this matter to the following:

SUSAN HALLEE (STAFF ACCOUNTANT)
(Name of Contact Person)

LANG MANAGEMENT COMPANY
(Firm/ Company)

790 PARK OF COMMERCE BLVD. Ste. 200
(Address)

BOCA RATON, FL 33487
(City/ State and Zip Code)

SUSANH@LANG-MANAGEMENT.COM

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

For further information concerning this matter, please call:

SUSAN HALLEE

(Name of Contact Person)

at 561 750-8800

(Area Code) (Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2018

SUSAN HALLEE
790 PARK OF COMMERCE BLVD.
SUITE 200
BOCA RATON, FL 33487

SUBJECT: VILLA VIZCAYA PROPERTY OWNERS ASSOCIATION, INC.
Ref. Number: N95000004111

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please list the title(s) of each officer in your document.

Please list the street address of each officer/director.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden 850-245-6973
Regulatory Specialist II

Letter Number: 618A00011221

RECEIVED
18 JUN 18 PM 12:45
TALLAHASSEE, FL 32314
SECRETARY OF STATE

Articles of Amendment
to
Articles of Incorporation
of

VILLA VIZCAYA PROPERTY OWNERS ASSOCIATION, INC

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

N 9500000 4111

(Document Number of Corporation (if known))

FILE
2018 JUN 18 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

N/A A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name

N/A B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

N/A C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>VP</u>	<u>SALOVITCH, ROBERT</u>	<u>16118 VILLA VIZCAYA PLACE</u> <u>DELRAY BEACH, FL</u> <u>33446</u>
2) ___ Change ___ Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>FRIEDMAN, RICHARD</u>	_____ _____ _____
3) ___ Change <input checked="" type="checkbox"/> Add ___ Remove	<u>D</u>	<u>TURETZKY, EDWARD</u>	<u>16112 VILLA VIZCAYA PLACE</u> <u>DELRAY BEACH, FL</u> <u>33446</u>
4) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____
5) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____
6) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____

N/A

Page 3 of 4

(F) The date of each amendment(s) adoption: REMOVED 3/8/18, if other than the date this document was signed.

(RS) Effective date if applicable: REMOVED
(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 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.

Dated 5/31/18

Signature Robert Salavitch
(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)

ROBERT SALOVITCH
(Typed or printed name of person signing)

Treasurer
(Title of person signing)