

N970 000006911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

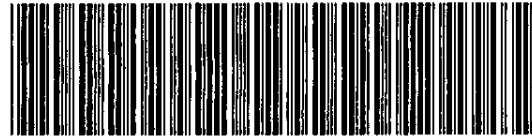
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/18/11--01007--013 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 12 PM 4:11

Amend
10 12/12/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Waverly Place Association, Inc

DOCUMENT NUMBER: N 9700000 6911

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

Please return all correspondence concerning this matter to the following:

Gary Blohm
(Name of Contact Person)

Waverly Place Association, Inc
(Firm/ Company)

1120 Avocado Isle
(Address)

Fort Lauderdale, FL 33315
(City/ State and Zip Code)

g.blohm@runbox.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Blohm at 305, 393 1238
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

- | | | | |
|--|--|---|--|
| <input 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

November 30, 2011

GARY BLOHM
WAVERLY PLACE ASSOCIATION, INC.
1120 AVOCADO ISLE
FORT LAUDERDALE, FL 33315

SUBJECT: BAY AREA IMPROV THEATRE, INC.
Ref. Number: N07000006911

We have received your document for BAY AREA IMPROV THEATRE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE COMPLETE THE FORM IN ITS ENTIRETY.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 011A00026864

RECEIVED
DEC 12 PM 8:14
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2011

GARY BLOHM
WAVERLY PLACE ASSOCIATION, INC.
1120 AVOCADO ISLE
FORT LAUDERDALE, FL 33315

SUBJECT: WAVERLY PLACE ASSOCIATION, INC.
Ref. Number: N97000006911

We have received your document for WAVERLY PLACE ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

PLEASE COMPLETE THE FORM IN ITS ENTIRETY.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 111A00026195

RECEIVED

NOV 30 PM 12: 16

DEPT. OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Waverly Place Association, Inc

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

N97000006911

(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:

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.

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

1120 Avocado Isle
Fort Lauderdale, FL 33315

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

1120 Avocado Isle
Fort Lauderdale, FL 33315

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:

GARY BLOHM

1120 AVOCADO ISLE

(Florida street address)

New Registered Office Address:

FT LAUDERDALE

(City)

Florida 33315

(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.

Gary Blohm
Signature of New Registered Agent, if changing

FILED
SECRETARY OF CORPORATIONS
11 DEC 12 PM 1:01
DIVISION OF CORPORATIONS

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>President</u>	<u>Georgia McCARTNEY</u>	<u>1214 W. LAS OLAS BLVD</u> <u>FT LAUDERDALE, FL 33312</u>
2) <u>1st President</u>	<u>Guy Kibler</u>	<u>1220 W. LAS OLAS BLVD</u> <u>FT LAUDERDALE, FL 33312</u>
3) <u>Secretary</u> <u>Treasurer</u>	<u>Gary Blohm</u>	<u>1120 Avocado Isle</u> <u>Port Lauderdale, FL 33315</u>
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) <u>President</u>	<u>BOB SCHRIEN</u>	4) _____	_____
2) <u>Secretary</u> <u>Treasurer</u>	<u>FRANCINE DOWD</u>	5) _____	_____
3) _____	_____	6) _____	_____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: _____

10/1/11

Effective date if applicable: _____

(no more than 90 days after amendment file date)

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 _____

11-28-11

Signature _____

Georgia A. McCartney

(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)

GEORGIA A. McCARTNEY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)