N97000006911

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(City/State/	Zip/Phone #)
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OCT 1 4 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Waverly Place As	sociation, Inc		
N97000006911 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Brett Petigrow			
	(Name of Contact Pe	erson)	
Waverly Place Association, Inc			
	(Firm/ Company	<i>y</i>)	· · · · · · · · · · · · · · · · · · ·
1214 W Las Olas Blvd			
	(Address)		
Fort Lauderdale, FL 33312			
	(City/ State and Zip	Code)	
bpctigrow@gmail.com			
E-mail address: (to be us	sed for future annual rep	ort notification	1)
For further information concerning this matter, plea	se call:		
Brett Petigrow	at	954	232-8260
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida I	Department of	State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Statu	& \$\square\$\$ \$43.75 Filing Fee s Certified Copy (Additional copy i enclosed)	Certifi s Certif	O Filing Fee icate of Status ied Copy is osed)
Mailing Address		reet Address	
Amendment Section Division of Corporations		nendment Secti	

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

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

Articles of Amendment to Articles of Incorporation of

Waverly Place Association, Inc						
(Name of Corporation	as current	ly filed with the Flor	ida Dept, of S	tate)		
N97000006911						
(Docum	nent Numbe	er of Corporation (if kr	nown)			_
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes	s, this <i>Florida Not Fo</i> r	r Profit Corpoi	ration adopts th	e follow	ing
A. If amending name, enter the new name of the	corporation	<u>on:</u>				
					The n	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated	" or the abbre	viation "Corp."	or "Inc	1. "
	_	1214 W Las Olas Blv	⁄d			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		Fort Lauderdale, FL 3	33312			_
						r,
					.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1214 W Las Olas Blv	⁄d			Ç
		Fort Lauderdale, FL 3	33312		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	— <u> </u>
					;-	— . .,
D. If amending the registered agent and/or regis	tered offic	e address in Florida.	enter the nam	e of the) (
new registered agent and/or the new registere					e.	,
Name of New Registered Agent:	Brett Petig	grow				
	1214 W L	as Olas Blvd				
	(Florida street address)			_		
New Registered Office Address:						
	Fort Laude	erdale		Florida 33312		
		(City)		(Zip Code)		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			the obligations	of the position.		
	Ĺ	1				
_	Si	gnature of New Regist	ered Agent, if a	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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	ST	Francine Dowd	1212 W Las Olas Bivd
Add			FT Lauderdale, FL 33312
X Remove			
2) Change	P	Robert E Schreiner	1212 W Las Olas Blvd
Add			Fort Lauderdale, FL 33312
X Remove			
3) Change	ST	Brett Petigrow	1214 W Las Olas Blvd
X Add			Fort Lauderdale, FL 33312
Remove			 -
4) Change	Р	Guy D. Kibler	1220 W Las Olas Blvd
X Add			Fort Lauderdale, FL 33312
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			, 7,654 to a

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
			· · ·	
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				<u> </u>
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	7 - 1-11-71-11-11-11-11-11-11-11-11-11-11-11			
				·
<u></u>				

	e date of each amendment(s) adoption:	, if other than the
date	e this document was signed.	
Eff	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we turnent's effective date on the Department of State's records.	Il not be listed as the
Ad	option 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 9-30-2016	
	Signature (By the thairman or vice chairman of the board, president or other officer-if directors	<u> </u>
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Daniel Elliot	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	