706869

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Michigan Man	or Condominium, Inc	
DOCUMENT NUM	BER: 706869		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		ardo Mancha	
	(Name of	Contact Person)	
	Leonard	o Mancha, P.A	
	(Firm	n/ Company)	
	1590 Mi	chigan Ave #1	
 	(,	Address)	
	Miami Be	each, FL 33139	
		te and Zip Code)	
	leonardom	ancha@live.com	ation)
For further information	on concerning this matter, pleas		,
Leonardo Mancha	· a	at (305) 302-622	24
(Name	of Contact Person)		me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	t of State:
 	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

Articles of Amendment to Articles of Incorporation of

10 FEB-1 PH 12: 55
TALLAHASSEE, FLORIDA

Michigan Manor Condominium Inc

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

706869

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

position.

(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:

The new name must be distinguishable and co abbreviation "Corp." or " Inc." <u>"Company" or</u>			corporated" or the
B. Enter new principal office address, if appl		1590 Michigan Av	re #1
(Principal office address <u>MUST BE A STREE'</u>	<u>TADDRESS</u>)	Miami Beach, FL	33139
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		1590 Michigan Av	e #1
· · · · · · · · · · · · · · · · · · ·		Miami Beach, FL	33139
D. If amending the registered agent and/or renew registered agent and/or the new regis			nter the name of the
Name of New Registered Agent:	Leor	ardo Mancha	···
	1590 N	/lichigan Ave #1	
New Registered Office Address:	(Flor	ida street address)	
	Mi	ami Beach	, Florida_33139 (Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the

Signature of New Registered Agent, if changing

Page 1 of 3

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)	•

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>O/D</u>	Renee M. Smith	420 Lincoln RD Ste 425 Miami Beach, FL 33139	☐ Add ☐ ☑ Remove
<u>P10</u>	Leonardo Mancha	1590 Michigan Ave #1 Miami Beach, FL 33139	☑ Add □ Remove
			☐ Add☐ Remove
E. If amen	ding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	

The date of each amendmen	t(s) adoption: 01/28/2010
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(suroval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_01/2	
Signature	JHEDO
hav	the chairman or vice chairman of the board, president or other officer-if directly not been selected, by an incorporator – if in the hands of a receiver, trusted er court appointed fiduciary by that fiduciary)
	Leonardo Mancha
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

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