Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220004089153)))



H220004089153ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FRANK, WEINBERG, BLACK, P.L.

Account Number : 120040000083

Phone : (954)474-8000

Fax Number : (954)474-9850

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN MAYAN TOWERS CONDOMINIUM I, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

Mayan Towers Condominium 1, Inc

••••			-		
(Name of Corporation as currently filed with the	Florida D	ept, of State)		<u> </u>	
	71	6414			
(Docum	ent Numbe	er of Corporation (if kn	iown)		
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statute	s, this <i>Florida Not Fo</i>	r Profit Corp	oration adopts	the following
A. If amending name, enter the new name of the	corporati	on:			
	Ing name, enter the new name of the corporation: The new distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." or "Co." may not be used in the name. The new principal office address, if applicable: Ice address MUST BE A STREET ADDRESS) The new incorporated or the abbreviation "Corp." or "Inc." or "Inc." or "Co." may not be used in the name.				
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated	" or the abbi	eviation "Corp	z." or "Inc."
B. Enter new principal office address, if applical					
	,				
				-	.022
0 D					DE.
C. Enter new maying address, if applicable: (Mailing address MAY BE A POST OFFICE I	3 <i>0X</i>)				<u>ت</u> ــــــــــــــــــــــــــــــــــــ
,				•	<u>.</u> 25
					=
					-
			enter the na	me of the	2n
Name of Name Province of County	Michael A	. Kassower, Esq.			
Name of New Registered Agent:	7805 SW	6th Court c/o Frank W	ainhera & B	lack Pľ	
	7005 5 77				
New Registered Office Address:		(,	
	Plantation			, Florida 3332	24
		(City)		(Zip Code)	
			the obligation	ns of the position	on,
	Sig	nature of New Registe	red Agent, if	changing	

H22000408915 3

H22000408915 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)

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	V Mike	<u>Doe</u> e Jones : Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			7022
Remove			
2) Change Add			EC
Remove 3) Remove Add Remove			- 55 - 55
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or ad (attach additional sa	ding additional in the delay additional in the delay additional in the delay and the delay additional in the delay additional	Articles, enter change(s) here: v). (Be specific)	
	<u> </u>		
		H22000408915 3	

	H22000408915 3	
		20/2
		2 DEC
		C
	-	://: B
		8
		<u> </u>
The date of each amendment(s) adoption this document was signed.	ption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment)	(ile date)
	t does not meet the applicable statutory filing	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes	s cast for the amendment(s)

H22000408915 3

H22000408915 3

ed by the board of	
Dated	/2/2/2022
Signature	Kathlen T. M'Schean
(By th	a chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Kathleen McGahran
-	(Typed or printed name of person signing)
	. President

2022 DEC -5 AH 8: 56