

717062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

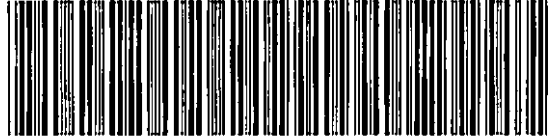
(Business Entity Name)

(Document Number)

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21 APR 23 PM 4: 53
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Handwritten signature/initials

COVER LETTER

TO: Amendment Section
Division of Corporations

THREE HORIZONS EAST CONDOMINIUM, INC.

NAME OF CORPORATION: _____

717062

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

IDA BELL

(Name of Contact Person)

(Firm/ Company)

12500 NE 15 AVENUE UNIT 305

(Address)

NORTH MIAMI, FL 33161

(City/ State and Zip Code)

threehorzonseastowners@gmail.com

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

For further information concerning this matter, please call:

IDA BELL

347

444-2612

at

(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:

- \$35 Filing Fee \$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)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of
THREE HORIZONS EAST CONDOMINIUM

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

(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:

~~XXXXXXXXXXXX~~

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.

THREE HORIZONS EAST CONDOMINIUM

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

12500 NE 15 AVENUE UNIT 305

NORTH MIAMI, FL 33161

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

THREE HORIZONS EAST CONDOMINIUM

CHANGE MAILING ADDRESS

12500 NE 15 AVENUE UNIT 305

REMOVE BDM PROPERTY MANAGEMENT

NORTH MIAMI, FL 33161

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

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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 <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ML</u>	<u>MANOEL FERREIRA</u> ADD	<u>12500 NE 15 AVENUE UNIT# 515</u> <u>NORTH MIAMI, FL 33161</u>
2) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ML</u>	<u>JENNY TRUJILLO</u> ADD	<u>12500 NE 15 AVENUE UNIT#214</u> <u>NORTH MIAMI, FL 33161</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>ML</u>	<u>WENDY JOHN</u> ADD	<u>12500 NE 15 AVENUE UNIT # 106</u> <u>NORTH MIAMI, FL 33161</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u> </u>	<u>Kaye Bender Rembaum</u> REMOVE from Registered Agent	<u>1200 Park Central Blvd South</u> <u>Pompano Beach, FL 33064</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u> </u>	<u>BDM Property Management</u> REMOVE from Mailing Address	<u>1603 S. Cypress Road</u> <u>Pompano Beach, FL 33060</u>
6) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>IDA BELL</u> UPDATE PRESIDENT ADDRESS	<u>12500 NE 15 AVENUE UNIT 305</u> <u>NORTH MIAMI FL 33161</u>

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

UPDATE CAROLYN BONI (Director) 12500 NE 15 AVENUE UNIT 615 , NORTH MIAMI, FL 33161
REMOVE BDM and their 1603 Cypress Road, Pompano Beach, FL address

REMOVE BDM Property Management LLC and their address 1603 S. Cypress Road, Pompano Beach, FL from
Director Stewart Charpentier AND Director Tito Dallavalle

The date of each amendment(s) adoption: _____ if other than the date this document was signed.

Effective date if applicable: _____
(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

4/19/21

Signature



(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)

IDA BELL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)