754078

(R	equestor's Name)	
(A	ddress)	
. (A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(B	usiness Entity Nar	me)
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(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LISE	TTE CONDO	MINIUM ASSOCIATION	i, INC.
DOCUMENT NUMBER: <u>754078</u>			
The enclosed Articles of Amendment	and fee are sub	omitted for filing.	
Please return all correspondence conce	erning this mat	ter to the following:	
JACKELINE FIGUERA		0.0	
	(Na	me of Contact Person)	
SPECIALIZED PROPERTY MANAG	GEMENT CO	RPORATION	
		(Firm/ Company)	
4654 WEST 4 AVENUE			
,		(Address)	
HIALEAH, FL 33012			
	(Cit <u>y</u>	y/ State and Zip Code)	
SPECIALIZEDCORPO	@AOL.COM	d for future annual report	not to action
E-man addr	ress: (to be use	d for future annual report	notification)
For further information concerning this	s matter, pleas	e call:	
JACKELINE FIGUERA		at (305) 824-2855
(Name of Contact Person	on)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following a	amount made p	ayable to the Florida Depa	artment of State:
_	5 Filing Fee & Teatus	□\$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		Street	Address

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2011

JACKELINE FIGUERA 4654 WEST 4 AVENUE HIALEAH, FL 33012

SUBJECT: LISETTE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 754078

We have received your document for LISETTE CONDOMINIUM 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 must have original signatures.

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) 245-6916.

Letter Number: 911A00027342

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

LISETTE CONDOMINIUM ASSOCIATION, INC.		
(Name of Corporation as currently	filed with the Florida Dept. o	of State)
754078		
(Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit</i>	t Corporation adopts the
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
N/A		
The new name must be distinguishable and contain the word '	"corporation" or "incorporate	ed" or the abbreviation
"Corp." or "Inc." "Company" or "Co." may not be used in	<u>the name</u> .	Agree .
B. Enter new principal office address, if applicable:	1990 MARSEILLE DRIVE	3 5
Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI BEACH, FL 33141	
	MIAMI BEACH, PE 33141	
		- Sec. 2
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	4654 WEST 4 AVE	<i></i>
	HIALEAH FL 33012	ATE PRIDA
		-
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ac 		he name of the
new registered agent and/or the new registered office a	uaress:	
Name of New Registered Agent: SPECIALIZED PR	OPERTY MANAGEMENT (CORP.
4654 WEST 4 AVI	3	
·	(Florida street address)	
New Registered Office Address:		
HIALEAH		lorida <u>33012</u>
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fan		gations of the position.
lawy	_	
Signature of New Regist	ered Agent, if changing	· · · · · · · · ·

Page 1 of 4

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.)

Title(s)	<u>N:</u>	ame	<u>Address</u>	
1) <u>P</u>	EILEEN MON	NTERO	4654 WEST 4 AVE HIALEAH FL 33012	
2) <u>VP</u>	MILENKA ZJ	ACIC	4654 WEST 4 AVE HIALEAH FL 33012	
3) <u>T</u>	MAURICIO A	RANGO	4654 WEST 4 AVE HIALEAH FL 33012	
4) <u>S</u>	MICHELE CA	ARBY	4654 WEST 4 AVE HIALEAH FL 33012	
5) <u>D</u>	CARMEN AL	MODOVAR	4654 WEST 4 AVE HIALEAH FL 33012	
6)				
<u>If REMOVI</u>	NG an officer and/or direct	or, please list the title(s)	and name of the officer/director to	be removed:
Title(s)	<u>Name</u>	Title	<u>Name</u>	
1) <u>P</u>	GERARDO ODIO	4)		
2) <u>T</u>	ANA SANTOS	5)	· · · · · · · · · · · · · · · · · · ·	
2\		6)		

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)	<u>≩</u> :	
N/A			
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·			
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		<u>-</u>	
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The date of each amendment(s) adoption: 11/30/2011
Effective date if applicable: 11/30/2011 (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 Signature (By the chairman or vice chairman of the board, president or other officer-if directors because the property of the board of the
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
EILEEN MONTERO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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