760105

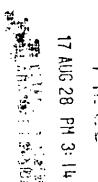
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R. William

COVER LETTER

TO: Amendment Section
Division of Corporations

1

NAME OF CORPORATION: ORDUNA COURT CONDOMINIOM, INC.					
DOCUMENT NUMBER: 760105					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
AUTONIO F. RAMOS					
(Name of Contact Person)					
BANKERS REBLESTATE PARTNERS, INC. (Firm/Company)					
299 ALHAMBRA CIRCLE, SUITE 404					
CORAL GABLES, FL 33134 - 5117 (City/ State and Zip Code)					
MIAMIMARLING AOL. COM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
AUTONIO F. RAMOS at (305) 461-0667 (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 \$\begin{array}{ c c c c c c c c c c c c c c c c c c c					
Mailing Address Amendment Section Street Address Amendment Section					

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

FILED

Articles of Amendment

17 AUG 28 PM 3: 14

Articles of Incorporation COURT CONDOMIN (Name of Corporation as currently filed with the Florida Dept. of State) 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: 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (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

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 = ChiefExecutive 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	PT John D V Mike J SV Sally S		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	VPD	FRANK ASTOR	2665 SOUTH BAYSHORE DRIVE SUITE 1103 CONUT GROVE, FL 33133-5462
· 2) X Change	PD	RISHI KAPOOR	2665 SOUTH GAYSHORE DRIVE SUITE 1103
Remove ' 3) Change Add	<u>SD</u>	CLAUDIA MEZERHANE	COCONUT GRONE, FL 33133-5462 2665 SOUTH BRYSHORE DRIVE SUITE 1103
Remove 4) Change Add	TD	DANIEL JAY MOTHA	COCONOR GROVE, PL 33/33-5462 2665 SOUTH BRYSHORE DRIVE SUITE 1103
Remove Add Remove	D		COCONUT GROVE, FL 33133-5462 DIGINE 196 STREET MIAMI, FL 33179-3513
∅) Change Add Remove	SD	MARTIN RODRIGO MAFORN	UNIT # 105
Kemove		Page 2 of 4	CORAL GABLES, FL 33146 - 2663

E. <u>If an</u>	nending or add th additional sh	ing additio eets, if nece	nal Articles, enter change(s) here: ssary). (Be specific)		
(7)	ADD	D	JENNIE FRANK KAPOOR	2665 500TH BAYS	HORE DRIVE
				SUITE 1103	-
				coconut grove, fl 3	7133 - 5462
(8)	OGA	D	RAY MOND GONZALEZ	2665 South Baysho	RE DRIVE
				SUITE 1103	-
 -	-			COCONUT GROVE, FL	- 33133 - 5462 -
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The date of each amendment(s) adoption: 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
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)
(Typed or printed name of person signing)
(Title of person signing)