N03000010766

Florida Department of State
Division of Corporations
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R. WHITE

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

THE CORAL HOUSE CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Coral House Condominium Association, Inc.

DOCUMENT NUMBER: N03000010706

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

Please return all correspondence concerning this matter to the following:

Ignacio G. del Valle,Esq.
(Name of Contact Person)

Weiss Serota Helfman Cole Bierman and Popok, P.L.
(Firm/ Company)

2525 Ponce de Leon Blvd., Suite 700
(Address)

Coral Gables, Florida 33134
(City/ State and Zip Code)

idelvalle@wsh-law.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ignacio G. del Valle at (305) 854-0800
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
14 DEC -3 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

The Coral House Condominium Association, Inc.

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

N03000010706

(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:

____________________ *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.*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

660 Crandon Blvd.
Suite 225
Key Biscayne, FL 33149

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

660 Crandon Blvd.
Suite 225
Key Biscayne, FL 33149

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: IlanaT.S. Cotrim

660 Crandon Blvd., Suite 225
(Florida street address)

New Registered Office Address:

Key Biscayne, Florida 33149
(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]
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 – 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 PT John Doe
X Remove V Mike Jones
X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	PD	Gerald Mayer	7187 West Oakland Park Blvd Lauderhill, FL33313
2) ___ Change X Add ___ Remove	PTD	Ilana T.S. Cotrim	660 Crandon Blvd. Suite 225 Key Biscayne, FL 33149
3) ___ Change X Add ___ Remove	VPD	Rejane de Paula	2666 Brickell Avenue Miami, FL 33129
4) ___ Change X Add ___ Remove	SD	Carlos Frost	P. O. Box 800639 Aventura, FL 33280
5) ___ Change ___ Add ___ Remove			
6) ___ Change ___ Add ___ Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: September 10, 2014, if other than the date this document was signed.

Effective date if applicable: ______________________
(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 12/03/14

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)

Ilana T.S. Cotrim
(Typed or printed name of person signing)

President/Treasurer
(Title of person signing)