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| (1 | Requestor's Name) | |
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| (, | Address) | |
| (, | Address) | |
| (1 | City/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (1 | Business Entity Nar | me) |
| (1 | Document Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions | to Filing Officer: | |
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| TO: Amendment Section Division of Corporations |
|---|
| NAME OF CORPORATION: MUVano of Delvay Beach Condo Assoc |
| DOCUMENT NUMBER: |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Bonnie Grossman Name of Contact Person |
| Myano of Delray Beach Condo Assoc, Inc. |
| 15005 Michelangelo Blud Address |
| De Iray Beach, FL 33446 City/State and Zip Code D9NSSMAN@Condonnum Concepts. um E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Contact Person at (561) 496-0062 Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

| N 050000 | Nently filed with the Florid 8707 | a Dept. of State | Ossociator Ln. |
|--|--|------------------|-------------------------|
| | mber of Corporation (if kno | wn) | |
| tursuant to the provisions of section 617.1006 to following amendment(s) to its Articles of I | | ida Not For Pro | fit Corporation adopts |
| . If amending name, enter the new name | • | | |
| if aniending name, enter the new name (| or the corporation. | | |
| he new name must be distinguishable and | | | porated" or the |
| bbreviation "Corp." or "Inc." "Company" | | n the name. | 72. |
| B. Enter new principal office address, if ap Principal office address MUST BE A STRE. | | - | |
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| | | | 3 3 |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF | | | 2: 3 |
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| | | n Florida, ente | r the name of the |
| D. If amending the registered agent and/or new registered agent and/or the new reg | | n Florida, ente | r the name of the |
| | | n Florida, ente | r the name of the |
| new registered agent and/or the new reg | | n Florida, enter | r the name of the |
| new registered agent and/or the new reg | | • | r the name of the |
| Name of New Registered Agent: | <u>(istered office address:</u> | • | r the name of the |
| new registered agent and/or the new reg | <u>(istered office address:</u> | • | |
| new registered agent and/or the new reg Name of New Registered Agent: New Registered Office Address: | (Elorida street of (City) | • | , Florida |
| new registered agent and/or the new reg | (istered office address: (Florida street of (City)) | - address) | , Florida (Zip Code) |

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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)

| <u>Title</u> | Name | Address Type of A | <u>Action</u> |
|--------------|--|--|---------------|
| 5 <u>t</u> | Patricia Faithfull | Address Type of A 15175Michelangelo Blod Add Apt #108 Remo | ove |
| ST_ | John Day | Delvay Beach, FC 33446 209-21 20th Avenue DAdd Apt H 31 Remo | |
| | | Day(1) At, 10 y 11360 | ove |
| | | L Remo | ove |
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| | ding or adding additional Articles, entereditional sheets, if necessary). (Be specially additional sheets) | | |
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| The date of each amendment(s) adoption: 12 18 09 |
|--|
| (date of adoption is refured) 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 |
| Signature Michelle Kessler |
| (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) |
| Michelle Kessler (Typed or printed name of person signing) |
| Board President |
| (Title of person signing) |