N06000001788

(Requestor's Name)

(Address)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA
10 DEC -9 PM 3:59

Amend
12/10/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Venice Isles Condominium Association

DOCUMENT NUMBER: N06000007788

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

Please return all correspondence concerning this matter to the following:

Nayive Bolivar
(Name of Contact Person)

(Firm/ Company)

2775 Taft Street, Unit 111
(Address)

Hollywood, FL. 33020
(City/ State and Zip Code)

Nayive.Bolivar@charleeprogram.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nayive Bolivar at (786) 970-62223
(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

Articles of Amendment
to
Articles of Incorporation
of

Venice Isles Condominium Association, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N06000007788
(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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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) ______________________________
____

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

2775 Taft St., Unit 111
Hollywood, FL. 33020
____

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: ______________________________

New Registered Office Address: ______________________________
(Florida street 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

<u>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:</u>
(Attach additional sheets, if necessary)

Title	Name	Address	Type of Action
P	Nayive Bolivar	2775 Taft Street, Unit 111 Hollywood, FL 33020	☑ Add ☐ Remove
VP	Reesa Hairston Watson	808 SW 7 Avenue Fort Lauderdale, FL 33315	☑ Add ☐ Remove
S/Tr	Sonia Martinez	2775 Taft Street, Unit 103 Hollywood, FL 33020	☑ Add ☐ Remove

** See attached additional sheet

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

Additional page Corporate Non Profit Amendment — Deletion

Title	Name	Address	Type of Action
O	Joe L. Balerdi	7301 SW 57 Ct., #525 Miami, FL. 33143	Remove**

This address should also be deleted as the mailing address. See prior section.

The date of each amendment(s) adoption: 9/21/10

(date of adoption is required)

Effective date if applicable: 9/21/10

(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 11/30/10

Signature Reesa Hairston Watson

(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)

Reesa Hairston Watson

(Typed or printed name of person signing)

Vice President

(Title of person signing)