

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000103019 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAW OFFICES OF STEINBERG & ASSOCIAT

Account Number : I19980000080

: (305)538-2344

Phone Fax Number

: (305)538-0419

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Smail	Address:		

## FLORIDA PROFIT/NON PROFIT CORPORATION 1747 Bay Road Condominium Association, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70,00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 08 2013

T. ROBERTS

## H130001030193

**COVER LETTER** 

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	DAD CONDOMINI	UM ASSOCIATION, INC.
DOCUMENT NUMBER: N12000010	722	
The enclosed Articles of Amendment and fee are sul	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Mark Alhadeff, Esq.		
	(Name of Contact Person	n)
The Alhadeff Group		
	(Firm/ Company)	
767 Arthur Godfrey Roa	nd	
	(Address)	
Miami Beach, FL 33140		
	(City/ State and Zip Cod	e)
mark@alhadeffla		
E-mail address: (to be use	d for future annual report	notification)
For further information concerning this matter, pleas	e cati:	
Mark Alhadeff	at (305	<sub></sub> 538-2344
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	D\$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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

H13000103019 3 Articles of Amendment

	to	13 HAY -7 PM 2.30	
	Articles of Incorpo of	TANK THE STANK	
1747 BAY ROAD CONDO	MINIUM ASSOC	IATAON INC. F. ORBA	
(Name of Corporation as currently fil	led with the Florida Dept.	of State)	<del></del>
N12000010722			
(Document Nu	umber of Corporation (if kno	wn)	
Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:		da Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of	of the corporation:		
			The new
name must be distinguishable and contain the "Company" or "Co." may not be used in the		corporated" or the abbreviation "Corp	o." or "Inc."
B. Enter new principal office address, if ap			
(Principal office address <u>MUST BE A STRE</u>	<u>EI ADDKESS</u> )		<del></del>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	le: FICE BOX)		
D. If amending the registered agent and/or new registered agent and/or the new res		n Florida, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
<del> </del>		F(+-:-)-	
	(City)	, Florida (Zip Code)	<del></del>
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	zing Registered Agent: lagent. I am familiar with a	and accept the obligations of the position	on.
Signatu	tre of New Registered Agent,	ifchanging	

Page 1 of 4

H130001030193

## H130001030193

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 X Remove X Add	PT John D Y Mike J SY Sally S	lones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>VP</u>	ANDREW MIRMELLI	1210 MICHIGAN AVE
Add			MIAMI BEACH, FL
X Remove			33139
2) Change	VP	MANNY E. DIAZ, JR.	1747 BAY ROAD
X			MIAMI BEACH, FL
Remove		,	33139
3) Change			
Add	<del></del>		
Remove			
4) Chango		<del> </del>	-
Add			
Remove			**
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

## H130<u>00010</u>3019<u>3</u>

E. If amending or adding additional Articles, enter change(s) here; (attach additional sheets, if necessary). (Be specific)				
			··-	
			<u></u>	
<b>^</b>			<del></del>	
		***		
			· · · · · · · · · · · · · · · · · · ·	
			~	
			, .	
		***		
	<del></del>		<u>.</u>	
	· · · · · · · · · · · · · · · · · · ·		<del></del>	

Page 3 of 4

		H13000103014.2
The	date of each amendment(s	May 7, 2013
Effective date <u>if applicable</u> :		May 7, 2013
	<u></u>	(no more than 90 days after amendment file date)
Ado	ption of Amendment(s)	(CHECK ONE)
	The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors.		
	Dated	5/7/13
	Signature	Male Maleti
		hairman or vice chairman of the board, president or other officer-if directors
		t been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
		Andrew Mirmelli
		(Typed or printed name of person signing)
		U D

(Title of person signing)