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COVER LETTER TO: Amendment Section Division of Corporations CONTEMPO HOMEOWNERS' ASSOCIATION, INC. NAME OF CORPORATION: N14000007457 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAQUEL P. CHONG (Name of Contact Person) CONTEMPO HOMEOWNERS' ASSOCIATION, INC. (Firm/ Company) 3470 NW 82ND AVENUE, SUITE 988 (Address) DORAL, FL 33122 (City/ State and Zip Code) MSHOJAEE@SHOMAGROUP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: FRANK SILVA, ESQ. 437-8658 786 (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 & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) 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

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Articles of Amendment to Articles of Incorporation of

	of	
· · ·	PO HOMEOWNERS' ASSOCIATIO	
Same of Corporation	as currently filed with the Florida	Dept. 01 State)
(Docum	nent Number of Corporation (if know	vn)
ursuant to the provisions of section 617,1006, Flor mendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Not For P.	rofit Corporation adopts the following
. If amending name, enter the new name of the	corporation:	
N'A		The new
ame must he distinguishable and contain the word Company" or "Co." may not be used in the name		
3. Enter new principal office address, if applica	ble:	
Principal office address MUST BE A STREET A		
(Mailing address <u>MAY BE A POST OFFICE</u>) D. <u>If amending the registered agent and/or registerew registered agent and/or the new register Name of New Registered Agent</u>	stered office address in Florida, en	ter the name of the
New Registered Office Address:		a street address)
New Registered Office Agaress.	N/A	
	(City)	, Florida (Zip Code)
	1. 197	tz.qx varcy
New Registered Agent's Signature, if changing Factories the appointment as registered agen		obligations of the position.
_	Signature of New Registere	d Agent, if changing 12.
	Page 1 of 4	4 P 3

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: XChange X Remove Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP/D	ORESTES LOPEZ-RECIO	3470 NW 82ND AVENUE
Add			SUITE 988
X Remove			DORAL, FL. 33122
2) Change	T/D	MIYUKI FUJIWARA	4191 NW 107TH AVENUE
X Add			DORAL, FL 33178
Remove Change	S	ADA ZELAYA	3470 NW 82ND AVENUE
Add			SUITE 988
X Remove			DORAL, FL 33122
4) Change	T/D	ANNETTE HERNANDEZ	4191 NW 107TH AVENUE
Add			DORAL, FL 33178
X Remove			
5) Change	S/D	EUIS S. CRUZ CARBAJAL	2520 SW 127TH AVENUE
X Add			MIAMI, FL 33175
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
V/A	
	<u> </u>
	·-

The date of each amendment date this document was signed	•	, if other than the
Effective date if applicable:	JUNE 16, 2017	
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will ine Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for the amendment(s) oproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was were firectors.	
Dated JUNI	16,2047	
Signature	multo Clory	
have i	chairman or vice chairman of the board, president or enter officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	RAQUEL P. CHONG	
	(Typed or printed name of person signing)	
	PRESIDENT / DIRECTOR	
	(Title of person signing)	