N16000005267

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF THE PROPERTY OF THE PR	E VILLAS CONDOMINIUM ASSOCIATION INC
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	matter to the following:
EVA HERNANDEZ	
	(Name of Contact Person)
CORAL GATE VILLAS CONDOMINIUM AS	SSOCIATION INC
	(Firm/ Company)
3444 SW 16 TERR	
	(Address)
MIAMI, FL 33145	
	(City/ State and Zip Code)
hernandez7766@bellsouth.net	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	lease call:
EVA HERNANDEZ	305 979-4067
(Name of Contact P	
Enclosed is a check for the following amount ma	ide payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of St	- · · · · · · · · · · · · · · · · · · ·
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CORAL GATE VILLAS CONDOMINIUM ASSOCIATION INC

N16000005267	·		
(Document)	ment Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statu	tes, this Florida Not For Profit	t Corporation adopts the following
A. If amending name, enter the new name of th	e corpora	tion:	
			The new
name must be distinguishable and contain the wor. "Company" or "Co." may not be used in the nam		ation" or "incorporated" or th	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if application	uble:	3444 SW 16 TERR	
(Principal office address MUST BE A STREET		MIAMI, FL 33145	
			200
		·	三 三 三 一
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	3444 SW 16 TERR	A 14 PH 4: 5
<u></u>		MIAMI, FL 33145	3
			088 f : 55
D. If amending the registered agent and/or regi	istored of	See address in Florida, ontart	<u> </u>
new registered agent and/or the new register			the name of the
Name of New Registered Agent:	EVA HI	ERNANDEZ	
	3444 SV	V 16 TERR	- 1
V 0 1 100 100 111		(Florida str	eet addressi
<u>New Registered Office Address</u>	: - MIAMI		33145
		(City)	, Florida (Zip Code)
		•	, , , , , , , , , , , , , , , , , , ,
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			ligations of the position.
	(En Flores is	22
•	(Signature of New Registered As	geht, 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 X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	RAMON REYES SEARCH	3442 SW 16 TERR
Add X Remove			MIAMI, FL 33145
2) Change	<u>s</u>	Lilia M. VESTERLOND	3446 SW 16 Ter Miami FL 33145
Remove 3) Change Add	Р	LETICIA GALAN	3438 SW 16TER MIAMI FL 33145
Add Remove	<u>P</u>	Zitha ZAMBRANO	3440 SW 16 TER MIANY FL 33145
5) Change Add Remove			
6) Change Add Remove			

utach additional sh	ing additional Areets, if necessary).	(Be specifi	c)				
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	10/22/2018/	
The date of each amend	lment(s) adoption:	, if other than the
date this document was s	signed.	
	10/22/2018	
Effective date if applica		
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will e on the Department of State's records.	not be listed as the
Adoption of Amendme	nt(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
Dated	10/22/2018	
Signature	Coux Tornands	
	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)	
	EVA HERNANDEZ	
	(Typed or printed name of person signing)	
	TREASURY	
	(Title of person signing)	