

N17289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

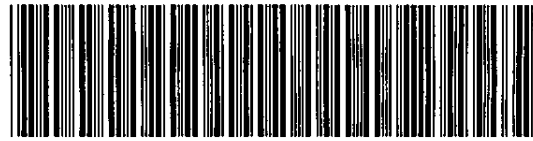
(Business Entity Name)

(Document Number)

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Amended

11/12/13--01031--020 **43.75

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2013 NOV 12 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APK
11/19/13



QUINTAIROS, PRIETO, WOOD & BOYER, P.A.

ATTORNEYS AT LAW

WWW.QPWBLAW.COM

9300 SOUTH DADELAND BOULEVARD, 4TH FLOOR
MIAMI, FLORIDA 33156
TELEPHONE: (305) 670-1101 ♦ FACSIMILE: (305) 670-1161

Roberto M. Ureta
Partner
rureta@qpwbllaw.com

November 5, 2013

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: Articles of Amendment for Westwind Lakes Garden Homes
Condominium Association, Inc.
Document No.: N17289
Our File No.: 53628**

To Whom It May Concern:

Enclosed please find the original Articles of Amendment pertaining to Westwind Lakes Garden Homes Condominium Association, Inc., together with my firm's check (No. 99577) made payable to Florida Department of State in the amount of \$43.75 in payment of the applicable filing fees.

Should you have any questions or would otherwise like to discuss the foregoing, please do not hesitate to contact me.

Sincerely,

Roberto M. Ureta
For the Firm

RMU/mpi
Enclosures

cc: Olga Fabat, President (via email only)
Westwind Lakes Garden Homes Condominium Association

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Westwind Lakes Garden Homes Condominium Association, Inc.

DOCUMENT NUMBER: N17289

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

Please return all correspondence concerning this matter to the following:

Roberto M. Ureta, Esq.

(Name of Contact Person)

Quintairos, Prieto, Wood & Boyer, P.A.

(Firm/ Company)

9300 S. Dadeland Blvd., 4th Floor

(Address)

Miami, Florida 33156

(City/ State and Zip Code)

rureta@qpwblaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberto M. Ureta

(Name of Contact Person)

at (305) 670-1101

(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

FILED

2013 NOV 12 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Westwind Lakes Garden Homes Condominium Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N17289

(Document Number of Corporation (if known))

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**)

c/o Alex Coloma
6511 SW 157 PI (Pool - Mgmt. Office)
Miami, Florida 33193

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: _____

(Florida street address)

New Registered Office 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

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Fhanor Escobar</u>	<u>6721 SW 152 Pl.</u> <u>Miami, Florida 33193</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Pedro Llanes</u>	<u>6795 SW 152 Ct. #37-95</u> <u>Miami, Florida 33193</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Amanda Santamarina</u>	<u>6603 SW 152 Ct. #40-03</u> <u>Miami, Florida 33193</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

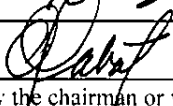
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 10-23-13

Signature 
(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)

Olga Fabat
(Typed or printed name of person signing)

President
(Title of person signing)