

N 19330

Florida Department of State  
Division of Corporations  
Public Access System

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.

((H09000172092 3)))



H090001720923ABC/

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)617-6380

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
 Account Number : 072450003255  
 Phone : (305)634-3694  
 Fax Number : (305)633-9696

FILED  
09 JUL 29 PM 1:49  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**WATERSIDE TOWNHOMES COMMUNITY ASSOCIATION, INC.**

RECEIVED  
2009 JUL 29 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	2
Page Count	04
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

6016127  
7/29/09  
7/29/09

FILED  
09 JUL 29 PM 1:49  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

WATERSIDE TOWNHOMES COMMUNITY ASSOCIATION, INC.

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

N19330

(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**)

28018 SW 141 PLACE

HOMESTEAD, FL 33033

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

28018 SW 141 PLACE

HOMESTEAD, FL 33033

**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:

MIRNA GODOY

New Registered Office Address:

28018 SW 141 PLACE

(Florida street address)

HOMESTEAD

(City)

Florida 33033

(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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PTD</u>	<u>ROBERT SAKOWITZ</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PTD</u>	<u>HENRY FONTALVO</u>	<u>28018 SW 141 PLACE</u> <u>HOMESTEAD, FL 33033</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VPD</u>	<u>JAIRO GARCES</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>VPD</u>	<u>IVAN OJEDA</u>	<u>28018 SW 141 PLACE</u> <u>HOMESTEAD, FL 33033</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SD</u>	<u>CHRISTIAN DARRELL</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SD</u>	<u>VICTOR PONCE</u>	<u>28018 SW 141 PLACE</u> <u>HOMESTEAD, FL 33033</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>RUTH SAKOWITZ</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>D</u>	<u>MIRNA GODOY</u>	<u>28018 SW 141 PLACE</u> <u>HOMESTEAD, FL 33033</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>D</u>	<u>NEMROD SALDANAS</u>	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>GUSTAVO VAN BRUSSELL</u>	<u>28018 SW 141 PLACE</u> <u>HOMESTEAD, FL 33033</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

The date of each amendment(s) adoption: July 20, 2009  
(date of adoption is required)

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 July 20, 2009

Signature Henry J. Fontalvo  
(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)

HENRY J FONTALVO  
(Typed or printed name of person signing)

PRECIDENT DIRECTORS  
(Title of person signing)