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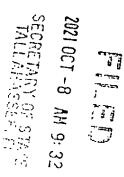
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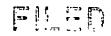
TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	NEW ALLIANCE CO	ONCO ASSOCIAT	ION, INC-A N	OT FOR PROFIT FL C	ORP.
DOCUMENT NUMBER:	N19000013948				
	1.6	21001		_	
The enclosed Articles of Amendo	ment and fee are subm	utted for filing.			
Please return all correspondence	concerning this matte	r to the following:			
	ENIC) CARVALHO, DI	EVELOPER		
_		Name of Contact I	Person)		
	NEW ALLIANC	D CONDO ASSO	CIATION, INC	. MGMT CO.	
		(Firm/ Compar	ny)		
	8421 S OF	RANGE BLOSSON	M TRAIL SUIT	TE 322	
		(Address)	•		
	OR	LANDO, FLORID	A, 32809		
· · ·	(City/ State and Zip	Code)		
	newa	ıllianceCOA@ecre	alty.net		
E-mai	l address: (to be used	for future annual re	port notification	n)	
For further information concerning	ng this matter, please	call:			
ENIO	CARVALHO	a	407	617-1534	
(Nar	ne of Contact Person)		(Area Code)	(Daytime Telephone	Number)
Enclosed is a check for the follow	wing amount made pay	yable to the Florida	Department of	State:	
	43.75 Filing Fee & [Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	is Certification (Add	0 Filing Fee ficate of Status fied Copy fitional Copy is osed)	
Mailing Addr			treet Address		
Amendment Se			mendment Sections of Corn		

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



NEW ALLIANCE CONDO ASSOCIATION, INC.

2021 OCT -8 AM 9: 32

(Name of Corporation as currently filed with the Florid	a Dept. of State)	
Ŋ	19000013 9 48	SECRETARY OF STA
(Document Nur	nber of Corporation (if know	11 15 15 15 15 15 15 15 15 15 15 15 15 1
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For Pr</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated" or	The new rathe abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	8421 S ORANGE BLOS	SOM TRAIL
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>) _{SUITE 322}	
	ORLANDO, FLRIDA, 32	2809
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NEW ALLIANCE CON	DO ASSOCIATION, INC.
	P.O.BOX 782333	
	ORLANDO, FL, 32878-	2333
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, ent e address:	er the name of the
Name of New Registered Agent:		O, DEVELOPER
	8421 S ORANGE BLOSSO	OM TRAIL SUITE 322
New Registered Office Address:	(Florida	street address)
	ORLANDO	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the	obligations of the position.
	Signature of New Registered	lho
	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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	PTD	ENIO CARVALHO	1592 SUN LIFE PATH SUITE 322
xxx Remove			ORLANDO, FL.32809
2) Change Add	PTD	ANDERSON L OLIVEIRA	11449 CLAYMONT CIRCLE WINDERMERE FL 34786
Remove 3) Change Add Remove	VP	FLAVIO COSTA BARROS	5739 NEW INDEPENDENCE PY WINTER GARDEN, FL, 34787
4) _xxx Change Add	<u>S</u>	JONATHAN G. REYES	8421 S ORANGE BLOSSOM TL SUITE 321
Remove 5) Change	D	CHARLES FLETCHER	ORLANDO, FL, 32809 1593 SUN LIFE PATH SUITE 322
Add _xxx Remove			ORLANDO, FL, 32809
6) Change Add	D	DAMIEN HIGGERSON	8421 S ORANGE BLOSSOM TL SUITE 322
Remove			oRLANDO, FL, 32809
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	
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The date of each amendment(s) adoption:date this document was signed.	<u> </u>			, if other than the
Effective date <u>if applicable</u> :				
Effective date if applicable: (no more than 90)	days after amend	ment file date)		
Note: If the date inserted in this block does not meet the appropriate document's effective date on the Department of State's record	plicable statutory rds.	filing requireme	nts, this date will	not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	OCTOBER 5TH 2021
Signatur	Enio Cavalho.
G	(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)
	ENIO CARVALHO
	(Typed or printed name of person signing)

(Title of person signing)