

706869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

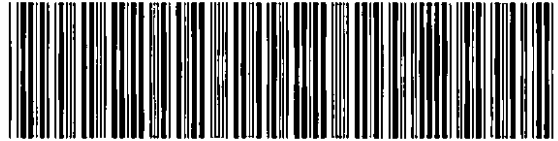
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/05/20--01001--004 \*\*35.00

2020 OCT -2 PM 3:55

2020 OCT -7 PM 3:54

C. GOLDEN

OCT - 8 2020

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

(OFFICE USE ONLY)

Business Name & Document Number, (if known):

1. Michigan Manor Condominium Inc 706869  
Name Document Number (if known)

x Walk in

\_\_\_ Will wait

\_\_\_ Certified Copy of:

\_\_\_ Certificate of Status

**NEW FILINGS**

\_\_\_ Profit  
\_\_\_ Not for Profit  
\_\_\_ Limited Liability  
\_\_\_ Domestication  
\_\_\_ INC  
\_\_\_ OTHER

**AMENDMENTS**

X Amendment  
\_\_\_ Resignation of R.A. Officer/Director  
\_\_\_ Change of Registered Agent  
\_\_\_ Dissolution/Withdrawal  
\_\_\_ Conversion  
\_\_\_ Merger

**OTHER FILINGS**

\_\_\_ Annual Report  
\_\_\_ Fictitious Name  
\_\_\_ Statement of Authority  
\_\_\_ APOSTIL

\_\_\_  
**COUNTRY**

**REGISTRATION/QUALIFICATIONS**

\_\_\_ Foreign  
\_\_\_ Limited Partnership  
\_\_\_ Reinstatement  
\_\_\_ Trademark  
\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: MICHIGAN MANOR CONDOMINIUM INC

DOCUMENT NUMBER: 706869

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

Please return all correspondence concerning this matter to the following:

Giorgio Picinelli

(Name of Contact Person)

(Firm/ Company)

1680 MICHIGAN AVE ste 910

(Address)

MIAMI BEACH, FL 33139

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Giorgio Picinelli

(305)

335 3449

at

(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:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

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

**Street Address**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

# 706869  
20 OCT -7 PM 4:02

October 6, 2020

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: MICHIGAN MANOR CONDOMINIUM INC  
Ref. Number: 706869

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The date of adoption of each amendment must be included in the document.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 520A00019398

Articles of Amendment  
to  
Articles of Incorporation  
of

MICHIGAN MANOR CONDOMINIUM INC

2007-7 PM 3:54

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

706869

(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)

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:

New Registered Office Address:

(Florida street address)

(City)

, Florida

(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:

X Change	<u>PT</u>	<u>John Doe</u>
X Remove	<u>V</u>	<u>Mike Jones</u>
X 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) <u>Change</u> <u>Add</u>	<u>TR</u>	<u>LEIDER, MARK</u>	<u>112 W 72nd St Apt 5G</u> <u>New York, NY 10023</u>
<u>Remove</u>			
2) <u>Change</u> <u>Add</u>	<u>P</u>	<u>AMIN, NEEL</u>	<u>101 S Fort Lauderdale Beach #1906</u> <u>Fort Lauderdale, FL 33316</u>
<u>Remove</u>			
3) <u>Change</u> <u>Add</u>	<u>VP</u>	<u>BETANCOURT, ALCIDES</u>	<u>2815 SW 103rd Pl</u> <u>MIAMI, FL 33165</u>
<u>Remove</u>			
4) <u>Change</u> <u>Add</u>	<u>P</u>	<u>BETANCOURT, ALCIDES</u>	<u>2815 SW 103rd Pl</u> <u>MIAMI, FL 33165</u>
<u>Remove</u>			
5) <u>Change</u> <u>Add</u>			
<u>Remove</u>			
6) <u>Change</u> <u>Add</u>			
<u>Remove</u>			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ 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

10/7/20

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)

Alexander G. BERNARDINI

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)