712954

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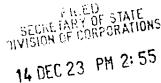
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: JADE WI	NDS ASSO	CIATION, INC.
DOCUMENT NUMBER: 712954		
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Miguel Rueda, MorValue	Managem	ent, Corp.
	(Name of Contact Person	1)
JADE WINDS ASSOCIA	TION, INC.	
	(Firm/ Company)	······································
1700 N E 191st Street		
	(Address)	
North Miami Beach, FL 3	33179	
	(City/ State and Zip Code	e)
Management@Ja	dewinds.or	g
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Miguel Rueda	_{at (} 305	_, 949-4816
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	□\$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, FI 32314	Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



JADE WINDS ASSOCIATION, INC.	(H DCO =	
(Name of Corporation as currently filed with the Flor	rida Dept. of State)	
712954		
(Document Number of Co	rporation (if known)	
cursuant to the provisions of section 617.1006, Florida Statutes mendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following	
. If amending name, enter the new name of the corporation	on:	
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	The ne ion" or "incorporated" or the abbreviation "Corp." or "Inc.	
. Enter new principal office address, if applicable:	1700 N E 191 STREET	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	NORTH MIAMI BEACH, FL 33179	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
· · · · · · · · · · · · · · · · · · ·		
 If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac 		
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
(City)	, Florida(Zip Code)	
•	• • •	
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan		
Signature of New I	Registered Agent, if changing	

Page 1 of 4

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	Y Mike	Doe c Jones c Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	PEREZ, SANTIAGO	1690 NE 191 STREET
Add			UNIT 214
X Remove			NORTH MIAMI BEACH FL 33179
2) Change	TD	BERGEMAN, JESSE	1770 N E 191 STREET
Add			UNIT 102
X Remove			NORTH MIAMI BEACH FL 33179
3) Change	D	PORETSKY, FLORENCE	1660 N E 191 STREET
Add			UNIT 309
X Remove			NORTH MIAMI BEACH FL 33179
4) Change	D	LEVI, LAURA	1770 NE 191 STREET
Add			UNIT 212
X Remove			NORTH MIAMI BEACH FL 33179
5) Change	<u>D</u>	BAUMANN, SCOTT	1780 NE 191 STREET
Add			UNIT 802
X Remove			NORTH MIAMI BEACH FL 33179
6) X Change	PD	GRAVER, ROBERT	
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)	
Change: TD, VELAZQUEZ, EDWARD	
Change: SD, TULLIO, REVILLA	
	·····
	······································
	
	

	date of each amendment(s) ad this document was signed.	option:		FILED STATE LTARY OF STATE FOR CORPORATIONS Fother than the
	ective date <u>if applicable</u> :	(no more than 90 days after	amendment file date)	C 23 PH 2; 55
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the numl.	nber of votes east for the a	amendment(s)
	There are no members or membadopted by the board of director	pers entitled to vote on the amendn	nent(s). The amendment(s	;) was/were
	Dated 11/25/2	2014	Luar E	
	have not bee	man or vice chairman of the board on selected, by an incorporator – if appointed fiduciary by that fiducian	in the hands of a receiver.	
	Robert Gra	aver		
		(Typed or printed name of person	signing)	_
	President			
		(Title of person signing)	_