717062

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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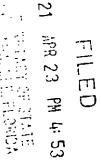
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COVER LETTER

TO: Amendment Section Division of Corporations

THREE HORIZONS EAST CONDOMINIUM, INC.

NAME OF CORPORATION:			· · · · · · · · · · · · · · · · · · ·	
document number:				
The enclosed Articles of Amendment and fee are submitte	ed for filing			
Please return all correspondence concerning this matter to	the following:			
IDA BELL				
(Na	ime of Contact Per	rson)		
	(Firm/ Company))		
12500 NE 15 AVENUE UNI	T 305			
	(Address)			
NORTH MIAMI, FL 33161				
(Ci	ty/ State and Zip C	Code)		
threehorizonseastowners@g	gmail.com			
E-mail address: (to be used for	future annual repo	ort notification)		
For further information concerning this matter, please call	l:			
IDA BELL		347	444-2612	
(Name of Contact Person)	at _	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made payab	ole to the Florida D	Department of S	tate:	
Certificate of Status (43.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certific Certific	onal Copy is	
Mailing Address		eet Address	_	
Amendment Section Division of Corporations		endment Section ision of Corpor		
P.O. Box 6327		The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

THREE HORIZONS EAST CONDOMINIUM

(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the	followin	
A. If amending name, enter the new name of the corporation	<u>ni:</u> XXXXXXXXXX	The new	
name must be distinguishable and contain the word "corporati" "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." o THREE HORIZONS EAST CONDOMI	r "Inc."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	12500 NE 15 AVENUE UNIT 305		
•	NORTH MIAMI, FL 33161		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	THREE HORIZONS EAST CONDOMINIU		
CHANGE MAILING ADDRESS REMOVE BDM PROPERTY MANAGEMEN	TOORTH MIAMI, FL 33161		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad			
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)	21	
	Florida	APR	
	(City) (Zip Code)	23	
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: iliar with and accept the obligations of the position:	8 ₽¥	
	3 E 5 E 2 E	t: 5;	
Sig	nature 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>V</u> <u>M</u>	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	ML	MANOEL FERREIRA	12500 NE 15 AVE.NUE UNIT# 515 NORTH MIAMI, FL 33161
Remove 2) Change Add	ML	JENNY TRUJILLO	12500 NE 15 AVENUE UNIT# 214 NORTH MIAMI, FL 33161
Remove Change Add Remove	ML	WENDY JOHN	12500 NE 15 AVENUE UNIT # 106 NORTH MIAMI, FL 33161
4) Change Add		Kaye Bender Rembaum REMOVE from Registered Agent	1200 Park Central Blvd South Pompano Beach, FL 33064
X Remove 5) Change Add		BDM Property Management REMOVE from Mailing Address	1603 S. Cypress Road Pompano Beach, Pt. 33060
_X Remove 6) _X Change Add	Р	IDA BELL UPDATE PRESIDENT ADDRESS	12500 NE 15 AVENUE UNIT 305 NORTH MIAMI< FL 33161
Remove E. If amending or add (attach additional sh		l Articles, enter change(s) here: ov). (Be specific)	
UDPATE CARO REMOVE BDM a	LYN BONI (D and their 1603 (Orrector) 12500 NE 15 AVENUE UNIT 615 Cypress Road, Pompano Beach, FL address	NORTH MIAMI, FL 33161
	''	agement LLC and their address 1603 S. Cypress I	Road, Pompano Beach. FL from

		_
		
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The date of each amendment(s) adoption date this document was signed.	on:, if other	er than the
Effective date if applicable:		
metive date <u>mappicanie</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	ies not meet the applicable statutory filing requirements, this date will not be listed tent of State's records.	as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes east for the amendment(s)	

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 4/19/2/ Signature West 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)
IDA BELL
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)