717438

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TO: Amendment Section

Division of Corporations

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: West Court Condominium Inc.
DOCUMENT NUMBER: 717438
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nicholas Del Verchio
(Name of Contact Person)
(Firm/ Company)
1615 WEST AVE 203 (Address)
(Address)
Miami 71 33139 (City/ State and Zip Code)
(City/ State and Zip Code)
Ndv2109@icbud.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nicholas Del Vecchio at 305 813 7301 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$452.50 Filing Fee Certificate of Status (Additional copy is enclosed) □ \$252.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

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West Coust condomi (Name of Corporation as currently filed with the Florida		nc Marie 180
Name of Corporation as currently fried with the Fioring	2	
(Document Nur	o D nber of Corporation (if k	enown)
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:	•	
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u>)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
many marks marks to the state of the state o		
D. If amending the registered agent and/or registered of		, enter the name of the
new registered agent and/or the new registered office	<u>e address:</u>	
Name of New Registered Agent:		
New Registered Office Address:	(I·	lorida street address)
, 		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ed Agent:	
New Registered Agent's Signature, it changing Registers I hereby accept the appointment as registered agent. I am	<u>familiar with and accep</u>	t 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.						
	leaves the o	corporatio	n, Sally Smith is named		PST and Mike Jones is listed as the V. There i should be noted as John Doe, PT as a Change	
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John De Mike Je Sally Si	o <u>e</u> mes			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address	
1) Change Add Remove						
2) Change Add		_				
Remove 3) Remove Add Remove		_				
4) Change Add						
Remove 5) Change		_				
Add Remove						
6) Change Add		_ _				
(attach additional s	sheets, if ne	cessary).				
Nicholos	Del	V ecci	hio can	be an	acting acting and and and an acting acting acting acting acting acting acting acting and acting acti	
ouss Pro	sider	4 01	- west	oult cor	adominium Inc	

located at 1615 west AVE MiAMi BEACH untill

next election on 01/01/2025

	
The date of each amendment(s) adoption: 1/1/2024 date this document was signed.	, if other than the
Effective date if applicable: too more than 90 days after amendment file da	le)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	

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)

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 0/10/2024 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)
Michal Selvechio (Typed or printed name of person signing)
President
(Title of person signing)

Articles of Amendment to Articles of Incorporation

1	of	10240CT 22
	``	n C 1067 22 p.
Name of Corporation as currently file	1 with the Florida Dept. of State)	'4
	717438	<u> </u>
	(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 617, amendment(s) to its Articles of Incorpora		or Profit Corporation adopts the following
A. If amending name, enter the new na	ime of the corporation:	
		The new
name must be distinguishable and contain "Company" or "Co." may not be used in	n the word "corporation" or "incorporated the name.	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address,	if applicables	
(Principal office address MUST BE AS		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE BOX)	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida v registered office address:	, enter the name of the
Name of New Registere	d Agent:	
Now Projectional Office		lorida street address)
<u>New Registered Office</u>	Address.	
	(C)	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if c		
I hereby accept the appointment as regist	ered agent. I am familiar with and accept	t the obligations of the position.

Signature of New Registered Agent, if changing

P = President; V= Vice	s, if necessary) lirector title by President; T= = Chief Finan	the first letter of the office title: Treasurer; S= Secretary; D= Dire cial Officer. If an officer/director.	ector; TR= Trustee; C = Chairman or Clerk; CEO = Chief holds more than one title, list the first letter of each office
Changes should be note a change, Mike Jones le Mike Jones, V as Remov	aves the corpo	ration, Sally Smith is named the V	s listed as the PST and Mike Jones is listed as the V. There is and S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she	ing additional rets, if necessar	Articles, enter change(s) here: (y). (Be specific)	
The Addi	tional	Alticle Amena	L Condominium Inc
Nicholas I	Del Ve	chio can be	an acting asses
geast Presi	dent	of west cons	L condominium Inc
located of	1615	west Ave M	iami Beach untill

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name,

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	. <u> </u>
	<u> </u>
, ,	
The date of each amendment(s) adoption: 1/1/2024 date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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 10/2024 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)
Michal Del Vecchio (Typed or printed name of person signing)
President
(Title of person signing)