## 719043

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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August 27, 2021

CASTO FUENMAYOR 875 NE 195 ST MIAMI, FL 33179

SUBJECT: AZURE LAKE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 719043

We have received your document for AZURE LAKE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

On line 5 has to show the current registered agent reflected on sunbiz.org. IF you are not trying to update the registered agent and tring to make changes to the officer/director information that will need to be filed on the articles of amendment form which is enclosed.

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.

Letter Number: 121A00020765

Catherine M Brumbley Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

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mitted for filing.		
ter to the following:		
(Name of Contact Perso	) 	··
Rembo	ium, P.L	•
(Firm/Company)	South	1
(Address)	33004	
(City/ State and Zip Cod	e)	
d for future annual report	notification)	
e call:		
a (A	POS ) (OS ) rea Code) (Daytime To	- OSDD- elephone Number)
ayable to the Florida Dep	artment of State:	
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified Copy	
	mitted for filing. er to the following:  (Name of Contact Perso  (Firm/ Company)  (Address)  (City/ State and Zip Cod  d for future annual report e call:  (Address)  (Address)  (Address)  (Address)	mitted for filing.  er to the following:  (Name of Contact Person)  PL  (Firm/ Company)  (Address)  (City/ State and Zip Code)  (City/ State and Zip Code)  (Area Code)  (Area Code)  (Daytime To ayable to the Florida Department of State:  (S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  (Additional Copy is enclosed)

Division of Corporations
P.O. Box 6327
Tallahassee, F1, 32314

TO: Amendment Section

Division of Corporations

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

## Articles of Amendment to

Attu	icles of fucor por action
Azure Lavo Cond	minium Association,
Name of Corporation as currently filed with the Florid	
	- 7190UB
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	The nev
name must be distinguishable and contain the word "corpo	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	1 10 = ot
B. Enter new principal office address, if applicable:	275 NE 195 ST
(Principal office address <u>MUST BE A STREET ADDRE.</u>	$^{(SS)}$ Ulami FI 33179
	NO Change
C. Enter new mailing address, if applicable:	$\Delta 1 \Delta$
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	26
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the
new registered agent and/or the new registered offic	
Name of New Registered Agent:	NIA BET 1
Nume of New Register Casagem.	
New Registered Office Address:	(Florida street address) 1-121 5
the state of the s	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agent. I am	
	<u> </u>

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, no 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each cheld. 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. 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 C Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example:  X Change X Remove X Add	PT         John E           V         Mike J           SV         Sally S	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	VP	Audin Lauis	275 Ne 1953 Liami H 331 P
Remove 2) Change Add			
3 ) Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she	ng additional Ar ets. if necessary).	ticles, enter change(s) here: (Be specific)	
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1 ]
The date of each amendment(s) adoption: , if oth
date this document was signed.
Effective date if applicable: (no more than 9) days after amendment file date)
· ·
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.
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 mer adopted by the be	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were ourd of directors.
• •	
Dated	
Signatur	. Alh
·	(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)
	NA
	(Typed or printed name of person signing)
	NA
	Title of person signing)