719324

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FIFTY SIX SIXTY	COLLINS AVE. COND	<u>OMINIUM,</u> IN
DOCUMENT NUMBER: 719324		
The enclosed Articles of Amendment and fee are submitted	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
(Name of Cont	N, ESQ.	
HYMAN, SPECTOR (Firm/Con	t MAS, UP	
150 W. FLAGLEL (Addre	57, SVITE 2	27 01
MAM, PC 35/2 (City/ State and	3 O d Zip Code)	
E-mail address: (to be used for For further information concerning this matter, please call	future annual report notification)
(Name of Contact Person)	at (305) 371-4 (Area Code & Daytime Te	1244 elephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of S	tate:
Certificate of Status (Certified Copy (Additional copy is	\$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, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	·

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FIFTY SIX SIXTY COLLINS AVE. CONDOMINIUM, INC.

(Name of Corporation as curre	ently filed with	<u>the Florida Dept. of S</u>	<u>tate</u>)	
-	719324			
(Document Num		ion (if known)		
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		, this <i>Florida Not For I</i>	Profit Corporation ad	lopts
A. If amending name, enter the new name of	f the corporatio	n:		
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o			corporated" or the	
B. Enter new principal office address, if app	licable:			
(Principal office address <u>MUST BE A STREE</u>			Su .	
			AR S	
C. Enter new mailing address, if applicable	•		-6 AAR	
(Mailing address MAY BE A POST OFFICE			##~ #1@ }	
			Σ. S	3
			7 m	
D. If amending the registered agent and/or r	registered office	address in Florida as	ntar the name of the	
new registered agent and/or the new regis			iter the name of the	
Name of New Paristons & Assets				
Name of New Registered Agent:				
New Registered Office Address:	(Flor	ida street address)		
		(City)	, Florida (Zip Code)	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered position.	d agent. I am	familiar with and acc	ept the obligations o	† the
<u> </u>	Signature of New	Registered Agent, if ch	nanging	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Arnold Goldman	5660 COLLINS AVE. 14A Miami Beach, Florida 33140	_
<u>s</u>	Kathy Friedman	5660 COLLINS AVE, 14E Miami Beach, Florida 33140	
<u>T</u>	Michael Schertzer	5660 COLLINS AVE. 7D Miami Beach, Florida 33140	_ □ Add _ ☑ Remove
E. If amen (attach a	ding or adding additional Articles, en dditional sheets, if necessary). (Be sp	ter change(s) here: pecific)	
	, , , , , , , , , , , , , , , , , , , 		
		. 	

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Edward Leberman	5660 Collins Ave # 12- A/B Miami Beach, FL 33140	☑ Add □ Remove
<u>S</u>	Jerome Uffner	5660 Collins Ave # 7-C Miami Beach, FL 33140	☑ Add ☐ Remove
<u>T</u>	Eunice Newman	_5660 Collins Ave # 14-B Miami Beach, FL 33140	☑ Add ☐ Remove
E. <u>If amer</u> (attach	nding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: especific)	
			,
			

The date of each amendment	t(s) adoption: February 16, 2010
Effective date <u>if applicable</u> :	(date of adoption is required) February 16, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	are adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	(Typed or printed hame of person signing)
	(Title of person signing)