720455

(Re	questor's Name)	·
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COVER LETTER

NAME OF CORPORATION: The Rose Endominium Iuc.
DOCUMENT NUMBER: # 720 455.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MAURICIO HRANGO (Name of Contact Person)
Rose Condo INC.
(Firm/ Company)
7725 CARly to AVE. Miami Beach Fl. 3314)
Mailing: Rose Pondo Inc. P.D. Box 4807 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: MAURICIO ARANGO (Name of Contact Person) at (786) 239-0356. (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S43.75 Filing Fee & S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certificate of Status (Additional Copy is Enclosed) S52.50 Filing Fee & Certified Copy (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

of 2
(Name of Corporation as currently filed with the Florida Dept. of State)
ROSE CONDO INC. 720453
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation:
. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." (Company" or "Co." may not be used in the name.
3. Enter new principal office address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
MAIING: ROSE CONDO FNC. Enter new mailing address, if applicable: P.O. Box 4807
(Mailing address MAY BE A POST OFFICE BOX)
MiAmi Beach F1.33141.
). If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: ORLANDO SCERETAR 17725 CANIJI AVC # 11 MIAMI Beach F1 33. (Florida street address).
7725 CANIZE AVE # 11 Miami Beach F1 33.
1125 (ANT/ HVE # 1/ MIAMI DEAULT 33
New Registered Office Address:
m. da.
(City) MiAmi F1. (Zip Code)
Tellarit Pl. (et em)
New Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Odla 1 a 1 (a das)
Signature of New Registered Agent, if changing
Signature of New Registerea 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	PT John I V Mike . SV Sally S	<u>Jones</u>	\sim
Type of Action (Check One)	Title	Name (pst	Address (Sold PPT- Smored) (Sold PPT- Smored) P.B. BOX 2424 Milni Bendi Ft. 33140 (400 Sul 8357.
1) Change Vic	Pasident.	DAVID ROSENFALD	Minni Bende 41. 33140 6400 S.W. 835T.
Remove	<u> </u>	XID	MIANU F/. 33) 43-7914 PHME. (305) 525-0396
	erctary	ORIANDO ACCRISTO	7725 CAN MARKE #1
Add Remove		× Orkento Olacanto	Misnie Bish 17. 33141
3) Change			
Remove	_		
4) Change	<u>Dic</u>	Orlando Accristo	7725 Carlye Are
Add		0	MixMi Beach, Fl 33/4/
5) Change	VP	CArlos RIOLFI	104005.W. 835+
Add			Miami, FL 33/43-79/4
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
Λ , ·	
Division of Corporations.	
CLIFTON Brilding	
266) Executive CENTER CIPULE	
TAllAhASSE Fl. 32301	
The Rose Condominium, Likes to Kerp	
on File BI OF IANUARY 1. 2016. Dre	
Following individuals, As The Condominion	'M
BOARD OF Rose Condo INC.	
	2390356
CARJOS RIOLFI (VICEPRISIDENT) 305-3	525-0396
ORLANDO ACCRISTO (SECRETARY) 305.	864-536
Also we would like to have a centificate	2 -
OF STATUS. When All MAMES And Filings AN	¥.
Reported And in order- IF Jou have Any questions please	,
CPIL TO ANY OF THE MUMBERS About	
Three day	-
1 Maril 900 Mandon	
MAURICIO AR	A140
(PRISIDENT	<i>t</i>)′
Page 3 of 4 Page 3 of 4 Roce Concles F. Marling: Pala Pada J.	NC.
RODE () 1 7	
Mpiling: Rose (mgo)	NC
Mpiling: Pose Pontot P.O. Box 48 Misni Brach	(F)
Midni Brach	3314/
<i>'</i>	33177

	of each amendment(s) addocument was signed.	option: <u>Decen</u>	mber 22/15.	, if other than the
Effective	date if applicable:	(no more than 90 a	days after amendment file date)	
Note: If	the date inserted in this blo	·	licable statutory filing requirements, t	this date will not be listed as the
	's effective date on the De			
Adoption	of Amendment(s)	(CHECK ONE)		
	amendment(s) was/were ac were sufficient for approva		nd the number of votes cast for the am	endment(s)
Thei	re are no members or members or membered by the board of directors	pers entitled to vote on the ors.	e amendment(s). The amendment(s)	was/were
	Dated	cember 2	2/15.	
	Signature	mme	<i>y</i>	<u> </u>
	have not be		the board, president or other officer-i orator – if in the hands of a receiver, t at fiduciary)	
		MAURICIO (Typed or	printed name of person signing)	
		Pr	Resident of B	bard.
			(Title of person signing)	