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JUN 1 2 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

West Ave Condo	
725025	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Maria Del Carmen Roberto	
	(Name of Contact Person)
West Ave. Condominium Association	
	(Firm/ Company)
1580 West Avenue Unit 205	
	(Address)
Miami Beach, Florida 33139	
	(City/ State and Zip Code)
mdelcarmen@betterw.org	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Maria Del Carmen Roberto	786 985 9881
(Name of Contact Pe	
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	e & S43.75 Filing Fee & S52.50 Filing Fee tus Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address

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

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

Articles of Amendment to Articles of Incorporation of

West Ave. Condominium, TNC.			
(Name of Corporation as	currently filed with	the Florida Dept. o	<u>f State</u>)
725025			
(Document	i Number of Corpora	ition (if known)	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Floria	la Not For Profit Cor	poration adopts the following
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "correpany" or "Co." may not be used in the name.		orporated" or the abo	breviation "Corp" or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)			= 3
armapar agree and as seem to see a see a see a seem to see a see			
			(2)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	(V) 1602 Alton	Road	
(maning data ess survey) (maning data ess survey)		rh, Florida 33139	;; -1
D. If amending the registered agent and/or register	ed office address in	Florida, enter the n	ame of the
new registered agent and/or the new registered	office address;		
Name of New Registered Agent: Ma	tered Agent: Maria Del Carmen Roberto Treasurer, Secretary		
16	02 Alton Road		
		(Florida street ac	ldress)
New Registered Office Address:			
<u>Mi</u>	iami Beach, Florida	33139	, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with a	nd accept the obligati	ions of the position.
	Signature of N	ew 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 hecessary)

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	$\overline{\underline{V}}$ Mik	<u>n Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Director	Erick Fiesel	1580 West Ave #508
Add			Miami Beach, Florida 33139
XX 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 adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) ARTICLE X						
agency.						

The	date of each amendmen	it(s) adoption:	, if other than the
	this document was signed		
		May 20, 2017	
Effe	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
<u>Not</u> doc	e: If the date inserted in tument's effective date on	this block does not meet the applicable statutory filing requirements, this date will no the Department of State's records.	nt be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members o adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated May	20, 2017	
	Signature	THURSE TO THE TOTAL TO THE TOTAL TOT	
	have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or recourt appointed fiduciary by that fiduciary)	
	N	faria Del Carmen Roberto	
	_	(Typed or printed name of person signing)	
	т	reasurer-Secretary	
	 -	(Title of person signing)	