729584

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(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: CORAL WAY VILLAGE ASSOCIATION, IN
DOCUMENT NUMBER: 729584 The enclosed Articles of Amendment and fee are submitted for filing.
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PLACIDO MARTÍNEZ
(Name of Contact Person) ORAL WAY VILLAGE ASSOCIATION INC. (Firm/Company)
(Firm/ Company) / 10300 5W 24th 5t. (Address)
MIAMI, FL 33165 (City/ State and Zip Code)
Info. coralwayvillage @ gmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PLACIDO MARTINEZ at 305 815 8183 (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 Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status \$3
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		7215 6 A V	<u>) 1. 55</u>
(Name of Corporation as curre	ently filed with the Flor	ida Dept. of State	
CORAL WAY VILLAGE AS	SOCIATION.	INC. 10	4758
	nber of Corporation (if kr		
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ates, this <i>Florida Not Fo</i>	r Profit Corporation adopts	the following
A. If amending name, enter the new name of the corpora	ation:		
VA			The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated	l" or the abbreviation "Cor	p." or "Inc."
B. Enter new principal office address, if applicable:	NA		
(Principal office address <u>MUST BE A STREET ADDRES.</u>	\underline{S})		
			2005 2005
C. Enter new mailing address, if applicable:			Į, <i>i</i> :
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA		
			<i>ω</i>
			,
D. If amending the registered agent and/or registered of		enter the name of the	11.
new registered agent and/or the new registered office	address:		
Name of New Registered Agent: NA			
	(Flo	orida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code,)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am		the obligations of the positi	on.
NA			
	Signature of New Registr	ered 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.

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	William R. BUTTER	10300 EW 24th St. apt: # C25 MIAMI, FL 33165
2) Add Remove	P	PLACIDO MARTINEZ	
3) Change Add Remove	<u>T</u>	Amelia Toural	151 Crandon BLVd. Uni+ 236 Key Biscayne, Fl 3314
4) Change Add Remove		Lilliam McBride	10300 SW 245t. B-16 Miami, FL 33165
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional A ttach additional sheets, if necessary). (Be specific)			
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date this document was signed. 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 not be listed as the 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 members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated 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) Lilliam Magnide. (Typed or printed name of person signing)		· · · ·	
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Dated Dated Signature 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) Liliam Maride (Typed or printed name of person signing)	殿		
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(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) Lilliam McBri Le (Typed or printed name of person signing)		Dated April 21, 2018	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Lilliam McBride (Typed or printed name of person signing)			_
Lilliam McBride (Typed or printed name of person signing)		have not been selected, by an incorporator - if in the hands of a receiver, trustee, or	
(Typed or printed name of person signing)		other court appointed tiduciary by that fiduciary)	
(Typed or printed name of person signing)		Lilliam Mopride	
VIAR - President		(Typed or printed name of person signing)	
(Title of person signing)		VICE-President	