## 734554

| (Re                     | questor's Name)    |             |  |
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| PICK-UP                 | ☐ WAIT             | MAIL        |  |
| (Bu                     | isiness Entity Nan | ne)         |  |
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: Bent Tree   | e Parcel 4 A   | ssociation, Inc.  |
|--|--|---|
| DOCUMENT NUMBER: 734554  | · •  | · ————————————————————————————————————  |
| The enclosed Articles of Amendment and fee are sub   | mitted for filing.   |   |
| Please return all correspondence concerning this matt  | er to the following:   |   |
| Ben Sigarreta  |  |   |
|  | (Name of Contact Person  | n)  |
| Fintax, Inc.   |  |   |
|  | (Firm/ Company)  |   |
| 10916 NW 7th Street # 5  | 504  |   |
|  | (Address)  |   |
| Miami, FL 33172  |  |   |
|  | (City/ State and Zip Code  | 2)  |
| fintax@bellsouth.  |  | <u> </u>  |
| E-mail address: (to be used  | d for future annual report i                                       | notification)   |
| For further information concerning this matter, please   | call:  |   |
| Ben Sigarreta  | <sub>at (</sub> 305  | 、229-0111   |
| (Name of Contact Person)   | ,  | ode & Daytime Telephone Number)   |
| Enclosed is a check for the following amount made pa   | ayable to the Florida Depa   | rtment of State:  |
| ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status                                  | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$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 | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address ment Section n of Corporations Building xecutive Center Circle lassee, FL 32301 |

## Articles of Amendment to Articles of Incorporation of

| y filed with the Florida Dept. of S  | <u>tate</u> )  |   |
|--|--|---|
|  |  |   |
| ument Number of Corporation (if kn   | iown)  |   |
| 006, Florida Statutes, this <i>Florida</i> ation:  | Not For Profit Corporati   | on adopts the follow  |
| me of the corporation:   |  |   |
| the word "corporation" or "incorporation" or "incor | oorated" or the abbrevia   | The i<br>tion "Corp." or "In  |
| f applicable:  |  |   |
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| cable:   |  |   |
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| d/or registered office address in F  | lorida, enter the name o   | f the   |
| registered office address:   |  | <del></del>   |
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| (Florida street add  | ress)  |   |
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| (City)   | , Florida  |   |
| (City)   |  | (Zip Code)  |
| anging Registered Agent:<br>red agent. I am familiar with and  | accept the obligations of  | the position.   |
|  |  |   |
|  | ument Number of Corporation (if known to the corporation:  The word "corporation" or "incorporation or "incorporation" or "incorporation or "incorporation" or | the word "corporation" or "incorporated" or the abbrevial the name.  f applicable:  FREET ADDRESS   Cable:  OFFICE BOX   (Florida street address)  (City) |

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:

 $P = President; V \neq Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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<br>V Mike J<br>SV Sally S | ones             |                    |         |
|-----------------------------------|-------------------------------------|------------------|--------------------|---------|
| Type of Action<br>(Check One)     | Title                               | <u>Name</u>      | Address            |         |
| 1) Change                         | Р                                   | Mauro Perez      | 13731 SW 46th Terr |         |
| Add                               |                                     |                  | Miami, FL 33175    |         |
| X Remove                          |                                     |                  |                    |         |
| 2) X Change                       | D                                   | Mauro Perez      | 13731 SW 46th Terr |         |
| Add                               |                                     |                  | Miami, FL 33175    |         |
| Remove                            |                                     |                  |                    | 13741   |
| 3 ) Change                        | <u>P</u>                            | Stuart E. Laiken | 13741 SW 46th Terr | € 3 141 |
| X Add                             |                                     |                  | Miami, FL 33175    |         |
| Remove                            |                                     |                  |                    |         |
| 4) Change                         | <del></del>                         |                  |                    |         |
| Add                               |                                     |                  |                    |         |
| Remove                            |                                     |                  |                    |         |
| 5) Change                         |                                     |                  |                    |         |
| Add                               |                                     |                  |                    |         |
| Remove                            |                                     |                  |                    |         |
| 6) Change                         | <del></del>                         |                  | <del>.</del>       |         |
| Add                               |                                     |                  |                    |         |
| Remove                            |                                     |                  |                    |         |

| F. | If amending or adding additional Arti            | icles enter change(s) here:             |
|----|--|---|
| ٠. | (attach additional sheets, if necessary).        | (Be specific)                           |
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| The  | date of each amendment                                       | (s) adoption: August 1, 2013   | , if other than the |
|------|--|--|---------------------|
| date | this document was signed.  ctive date <u>if applicable</u> : | August 1, 2013   |                     |
|      |  | (no more than 90 days after amendment file date)   |                     |
| Ada  | ption of Amendment(s)  | (CHECK ONE)  |                     |
|      | The amendment(s) was/w was/were sufficient for ap            | ere 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 c            | members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.   |                     |
|      | Dated Aug  | gust 9, 2013   |                     |
|      | Signature  | MEG  |                     |
|      | have n   | chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) |                     |
|      | Stuart i   | ∃. Laiken  |                     |
|      | <del> </del>   | (Typed or printed name of person signing)  |                     |
|      | Preside  | ent  |                     |
|      |  | (Title of person signing)  |                     |