## 735709

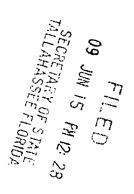
| (Requestor's Name)                      |
|---|
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| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## 'COVER LETTER

**TO:** Amendment Section Division of Corporations

| MAME OF CORPORATION: VERSAILLES GA   | ARDENS II CONDOMINI   | IUM ASSOCIATION, INC.   |  |  |
|--|---|---|--|--|
| DOCUMENT NUMBER: 735709  |   |   |  |  |
| The enclosed Articles of Amendment and fee are sub   | omitted for filing.   |   |  |  |
| Please return all correspondence concerning this mat   | ter to the following:   |   |  |  |
| Magda Mejides  |   |   |  |  |
| (Name of   | Contact Person)   |   |  |  |
| VERSAILLES GARDENS II (  | CONDOMINIUM ASSOCIA   | ATION, INC.   |  |  |
| (1 1111  | i Company)  |   |  |  |
| 9430 West Flagler St.  |   | 10 de 100 carro   |  |  |
| Miami, Fl. 33174   | Address)  |   |  |  |
| (City/ Sta   | te and Zip Code)  | <del></del>   |  |  |
| versaillesgarden@bellsc<br>E-mail address: (to be use  | outh.net<br>ed for future annual report notifi  | cation)   |  |  |
| For further information concerning this matter, pleas  | e call:   |   |  |  |
| Magda Mejides  | at ( 305 ) 221-7<br>(Area Code & Dayt   | 960   |  |  |
| (Name of Contact Person)   | (Area Code & Dayt   | ime Telephone Number)   |  |  |
| Enclosed is a check for the following amount made p  | payable to the Florida Departme   | nt 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 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |   |  |  |

## Articles of Amendment to Articles of Incorporation of

| 735709   |                    |                      | Tate) SEE FLOT        |
|--|--------------------|----------------------|-----------------------|
| (Document Numb   | er of Corporati    | on (if known)        |                       |
| rsuant to the provisions of section 617.1006, Fe following amendment(s) to its Articles of Inc       |                    | this Florida Not For | Profit Corporation ac |
| If amending name, enter the new name of  | the corporation    | <u>n:</u>            |                       |
| N/A  |                    |                      |                       |
| e new name must be distinguishable and cor<br>breviation "Corp." or "Inc." <mark>"Company" or</mark> |                    |                      | corporated" or the    |
| Enter new principal office address, if appli   |                    | N/A                  |                       |
| rincip <mark>al</mark> office address <u>MUST BE A STREET</u>  | <u>r ADDRESS</u> ) |                      |                       |
|  |                    |                      |                       |
|  |                    |                      |                       |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC                       | E BOX)             | N/A                  |                       |
|  |                    |                      |                       |
|  |                    |                      |                       |
|  |                    | -                    |                       |
| If amending the registered agent and/or re   |                    |                      | nter the name of the  |
| new registered agent and/or the new regist   |                    |                      |                       |
| Name of New Registered Agent:  |                    | N/A                  |                       |
| _  |                    |                      |                       |
| New Registered Office Address:   | (Flori             | da street address)   |                       |
| <u>-</u>   |                    |                      | , Florida             |
|  |                    | (City)               | (Zip Code)            |
|  |                    | gent:                |                       |

## 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>  | Name  | Address  | Type of Action     |
|---------------|---|--|--------------------|
| S             | Zoila G. Dominguez  | 9430 West FlaGLER St<br>Miami, Fl. 33174         | Add Remove         |
| S             | Carmen Naumann  | 9 <u>430 West Flagler St</u><br>Miami, Fl. 33174 | Add Remove         |
| V <u>S</u>    | Tamara Masferrem Masferrer  | 9430 West Flagler St<br>Miami, Fl. 33174         | •⊠ Add<br>□ Remove |
| E. If amendic | ng or adding additional Articles, enter distributional sheets, if necessary). (Be specificational sheets) | change(s) here:                                  |                    |
|               |   |  |                    |
|               |   |  |                    |
|               |   |  |                    |
| _             |   |  |                    |
|               |   |  |                    |
|               |   |  |                    |
|               |   |  |                    |
|               |   |  |                    |
|               |   |  |                    |

| The date of each amendment(s)                              | adoptionAp    |  | doption is                            |                     | eeting      | and R     | <u>e</u> gular | Meeting |
|--|---------------|--|---------------------------------------|---------------------|-------------|-----------|----------------|---------|
| Effective date <u>if applicable</u> :                      | (no mo        | ore than 90 day                                      | · · · · · · · · · · · · · · · · · · · |                     | date)       |           | <del>-</del>   |         |
| Adoption of Amendment(s)                                   | ( <u>C</u> )  | HECK ONE)  |                                       |                     |             |           |                |         |
| The amendment(s) was/were a was/were sufficient for approv |               | ne members and                                       | d the numb                            | er of votes c       | ast for the | amendme   | nt(s)          |         |
| There are no members or men adopted by the board of direc  |               | d to vote on the                                     | e amendme                             | nt(s). The a        | mendment(   | (s) was/w | ere            |         |
| Dated June   | 9, 2009       |  |                                       |                     |             |           |                |         |
| Digitatur  | an            |  | Gr.                                   |                     |             |           | <del></del>    |         |
| have r   | ot been selec | r vice chairma<br>cted, by an inc<br>ed fiduciary by | corporator -                          | - if in the ha      |             |           |                |         |
| -  | ANI           | 9 H. 'yped or printe                                 | A name of                             | SA<br>person signin | ng)         |           |                |         |
|  | PRe:          | Siden  | 7                                     |                     |             |           |                |         |
|  |               | (Title of p  | erson signi                           | ne)                 |             |           |                |         |

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