738666

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R. WHITE
JUN 8 223

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Delray (XIF VIEW) COIXOMINIUM ASSO	<u> 219</u> +				
DOCUMENT NUMBER: 7381ddo					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Cynthia L. Vallet					
(Name of Contact Person)					
Cinthias Mibile Bookheping Bervice INC					
Lett W Atlantic Blyd #207					
WhrGade Florda 33003 (City/ State and Zip Code)					
INFOOD Curthus brookkeeping com E-mail address: (to be used for future annual report notification)					
for further information concerning this matter, please call:					
Cynthia Valdez at 954549.612)					
(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					
Mailing Address Street Address					
Amendment Section Amendment Section	Amendment Section				

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

A	١	rt	ic	les	of	1	п	c	0	ro	0	r	а	t	ic	r

to Articles of Incorporation
of
(Name of Corporation as currently filed with the Florida Dept. of State)
7386ds
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) CATIN 1868 Beach (6)189
C. Enter new mailing address, if applicable: C. Enter new mailing address, if applicable: [Cold 10] 1110174 C 121101
(Mailing address MAY BE A POST OFFICE BOX) +107 11 aigue 8 33663
D. 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: WHHIA VAIOCE
Lold WATIANTIC BUCT
New Registered Office Address:
1) las Code) 33063
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
THE HA
W Signature of New 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 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	V Mik	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>TSD</u>	Tationson	1104 Ocean Dr
Remove 2) Change Add	PD	Maxim Edg	RESOLCOLINS AU # 2009
Remove 3) Remove			Sonry Isles Beach 76 3314
4) Change Add			<u></u>
Remove 5) Change Add			
6) Change Add Remove			
		Articles, enter change(s) here: v). (Be specific)	

		
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	_	
		
<u> </u>		<u> </u>
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date ent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendmen	u(s)

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 4 Y
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)
Nowim Eda (Typed or printed name of person signing)
President
(Title of person signing)