

740138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

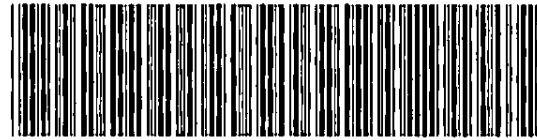
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19 AUG 15 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. YOUNG
AUG 15 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2019

ZELMA IGLESIAS
QUADOMAIN RECREATION ASSOCIATION, INC
2201 S OCEAN DRIVE
HOLLYWOOD, FL 33019

SUBJECT: QUADOMAIN RECREATION ASSOCIATION, INC.
Ref. Number: 740138

We have received your document for QUADOMAIN RECREATION ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 319A00014863

2019 AUG 15 AM 10:38

RECEIVED

Corrected!

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: QUADOMAIN RECREATION ASSOCIATION INC.
DOCUMENT NUMBER: 740138

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ZELMA Iglesias
Name of Contact Person
QUADOMAIN RECREATION ASSOC.
Firm/ Company
2201 S. OCEAN DRIVE
Address
HOOLYWOOD, FL. 33019
City/ State and Zip Code
MANAGER@QUADOMAINREC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZELMA Iglesias at (954) 921-8884
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 ☐ \$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

QUADOMAIN RECREATION ASSOCIATION INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

740138

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new
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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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: _____

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

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.

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>SHARON HAZZOURI</u>	<u>2301 S. OCEAN DR.</u> <u># 2506</u> <u>HOLLYWOOD, FL. 33019</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V. P.</u>	<u>PAOLA HERNANDEZ CASTILLO</u>	<u>2301 S. OCEAN DR.</u> <u># 508</u> <u>HOLLYWOOD, FL. 33019</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>STEVEN RUSSELL</u>	<u>2301 S. OCEAN DR.</u> <u># 2608</u> <u>HOLLYWOOD, FL. 33019</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>PAULINE VITALE</u>	<u>2301 S. OCEAN DR.</u> <u>#</u> <u>HOLLYWOOD, FL. 3309</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>VLADIMIR BELFOR</u>	<u>2401 S. OCEAN DR.</u> <u># 2301</u> <u>HOLLYWOOD, FL 33019</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

[illegible]

The date of each amendment(s) adoption: 7/10/2019 if other than the 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 7/10/2019

Signature Maggie L. Pacheco
(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)

MAGGIE L. PACHECO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)