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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

iradise Villas Condominium Association, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$\$35 Filing Fee \$\Bigcup\$43.75 Filing Fee & \$\Bigcup\$\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address

Amendment Section Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation of

Paradise Villas Conc	Jm.	in i Um	~ As	<~~\(Him.	Jnc
(Name of Corporation as currently filed with the F	<u> Ulll</u> Florida D	ept. of State)			X (O)	<u>Cric</u>
75671	1	- ,				
7004		6.0	. (:61			
(Documen	nt Numbe	r of Corporat	ion (it kr	iown)		
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes	s, this <i>Florida</i>	i Not Fo	r Profit Corpe	oration adopts t	he following
A. If amending name, enter the new name of the co	corporatio	on:				
						The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	'corporati	on" or "inco	rporated	" or the abbro	eviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable						
(Principal office address <u>MUST BE A STREET AD</u>	<u>DRESS</u>)					,.;·
	,		·			
	-					
C. Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u>OX</u>)					
						. ·
	-	<u></u>				—
						<u> </u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered			Florida,	enter the nai	me of the	
Name of New Registered Agent:						
	•					
New Registered Office Address:			(Fle	orida street addre	PSS)	
_				 	, Florida	
		(City)			(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered A I am fam	Agent: niliar with and	d accept	the obligation	s of the position	n.
	Sig	nature of Nev	w Registe	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: XChange X Remove X Add		Doe 2 Jones 2 Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	DIT	Boy, Jacques	501 Blue Heran Drive
Remove 2) Change Add	P	Saa, Naria	Halkindale Beach, Fl. 33005 501 Blue Heron Drive #322A
Remove Change Add Remove	D	Brehnan, Karen	Hulkindale Beach, Fl. 33009 SQL Blue Heran Drive #322A Hallandale Beach, Fl. 33009
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she		articles, enter change(s) here:). (Be specific)	
			

The date of each amendment(s) adoption:					
					
			201731		
					
		_			
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		· · · · · · · · · · · · · · · · · · ·			
					
					· · · · · · · · · · · · · · · · · · ·
					
				-	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	The date of each amendment(s) adopti date this document was signed.	on:			if other than the
(no more than 90 days after amendment file date)	Effective date if applicable:				
	a applicable.	(no more than 90 da	ys after amendment j	île 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 east 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 108 2020					
Signature amouge de la					
(By the chairman of 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)					
Amaya Valdes					
(Typed or printed name of person signing)					
Secretary					
(Title of person signing)					