751028

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

THE CORVETTE CON NAME OF CORPORATION:	DOMINIUM AS:	SOCIATION, I	NC.
751028 DOCUMENT NUMBER:			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
SARA C. GONZALEZ-RIZO			
(Na	ame of Contact Pe	erson)	
THE CORVETTE CONDOMINIUM ASSOCIATION, I	NC.		
	(Firm/ Company)	
7430 BYRON AVENUE, UNIT 3-A			
	(Address)		
MIAMI BEACH, FLORIDA 33141			
(Ci	ty/ State and Zip (Code)	
sara.gonzalez82@gmail.com			
E-mail address: (to be used for	future annual rep	ort notification)
For further information concerning this matter, please call	:		
SARA C. GONZALEZ-RIZO	at	786	271-6437
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida D	Department of S	tate:
(.	643.75 Filing Fee of Certified Copy Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy is sed)

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



THE CORVETTE CONDOMINIUM ASSOCIAT	TION, INC.	16 APR -5 PM 12: 36
(Name of Corporation	as currently filed with the Flori	da Dept. of State)
751028		SECRÉTANY OF STATE TALLAHASSEE, FLORIGA
(Docur	nent Number of Corporation (if known	own)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	7430 BYRON AVEN	UE
(Principal office address <u>MUST BE A STREET A</u>	DDRESS) UNIT NO. 3-A	
	MIAMI BEACH, FLO	ORIDA 33141
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	
D. If amending the registered agent and/or reginew registered agent and/or the new register		enter the name of the
Name of New Registered Agent:	SARA C. GONZALEZ-RIZO	
	7430 BYRON AVENUE, UNIT	3-A
New Registered Office Address:	•	rida street address)
	MIAMI BEACH	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	ut. I am familiar with and accept t	
	Signature of New Registe	red 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	<u>V Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	ST	SARA C. GONZALEZ-RIZO	7430 BYRON AVENUE
X Add		, , , , , , , , , , , , , , , , , , , 	UNIT NO. 3A
Remove			MIAMI BEACH, FL 33141
2) Change	ST	SARA GARCIA-RIZO	7430 BYRON AVENUE
Add			UNIT NO. 3-A
X Remove			MIAMI BEACH, FL 33141
3) Change			
Add			
Remove			
4) Change	TD	GLORIA SORIANO	7440 BYRON AVENUE
Add			UNIT 9-B
X Remove			MIAMI BEACH, FL 33141
5) Change		 	
Add			
Remove			Market Control of the
6) Change	 	·	
Add			
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amewas/were sufficient for approval.	:ndment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) wadopted by the board of directors.	ras/were
Dated March 30, 2016	
Signature	
(By the chairman of vice thairman of the board, president or other officer-if have not been selected, by an incorporator — if in the hands of a receiver, troother court appointed fiduciary by that fiduciary)	
SARA C. GONZALEZ-RIZO	
(Typed or printed name of person signing)	
SECRETARY, TREASURER	
(Title of person signing)	