Page 1 of l

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COR AMND/RESTATE/CORRECT OR O/D RESIGN GROVE GATE CONDOMINIUM ASSOCIATION, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations Grove Gate Condominium Association, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Sherman (Name of Contact Person) Thomas G. Sherman, P.A. (Firm/ Company) 90 Almeda Avenue (Address) Coral Gables, Florida 33134 (City/ State and Zip Code) mike@uniontitleservices.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; Michael Shorman 305-448-5898 (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 & □\$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)

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

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GROVE GATE CONDOMINIUM ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 751645 (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: 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. 890 SOUTH DIXIE HIGHWAY B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS) CORAL GABLES, FLORIDA 33146 C. Enter new mailing address, if applicable: 890 SOUTH DIXIE HIGHWAY (Mailing address MAY BE A POST OFFICE BOX) CORAL GABLES, FLORIDA 33146 D. If amending the registered agent and/or registered office address in Florida, onter the name of the new registered agent and/or the new registered office address: Thomas G. Sherman, P.A. Name of New Recistered Agent: 90 Almeria Avenue (Florida strees address) New Registered Office Address: Florida 33134 Coral Gables (City) Now Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am familia With and accept the obligations of the position. of New Registered Agent, if changing

Page 1 of 5

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 | PT John D Y Mike I SV Sally S | DDe5 | |
|----------------------------------|-------------------------------------|--------------------------------|-----------------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P | Robert C. Frazier | 3176 SW 27 Avenue, Unit 4 |
| Add | • | | Miami, Florida 33133 |
| X Remove | | | |
| 2) Change | <u>T</u> | Tony Romano | 3176 SW 27 Avenue, Unit 6 |
| Add | | | Miami, Florida 33133 |
| X Remove | | | |
| 3) Change | <u>s</u> | Stefano Ciribe | 3176 SW 27 Avenue, Unit 5 |
| Add | | | Miami, Florida 33133 |
| X Remove | | | |
| 4) Change | D | Iveliage Puente | 2561 SW 24 Street |
| Add | , <u>-</u> | | Miami, Florida 33133 |
| X Remove | | | |
| 5) Change | D | Mark Mangrum | 3220 Gifford Lane, # 1 |
| Add | | | Mlami, Florida 33133 |
| × Remove | | | |
| 6)Change | DP | Daniel Goncalves Lopes Ribelro | 890 South Dixie Highway |
| X Add | | | Coral Gables, Florida 33146 |
| Ramove | • | Page 7 of 5 | |

X :

| Type of Action (Check One) X | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
|------------------------------------|--------------|--------------|-----------------------------|
| δ)Change | DΤ | Javier Lluch | 890 South Dixie Highway |
| X Add | | | Coral Gables, Florida 33146 |
| Remove | | · . | |
| 6) Change | DS | CESAR SORDO | 890 South Dixie Highway |
| X Add | | | Coral Gables, Florida 33146 |
| Remove | | • | |

| If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) | | | |
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Page 4 of 5

| The | date of each amend | ment(s) adoption: | _ if other than the |
|------|--|--|---------------------|
| date | this document was si | gned. | |
| Trec | | November 21, 2016 | |
| EIL | ective date <u>if applical</u> | (no more than 90 days after amendment file date) | |
| | | in this block does not meet the applicable statutory filing requirements, this date will not to on the Department of State's records. | e (isted as the |
| Add | option of Amendmen | t(s) (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were sufficient f | eas/were adopted by the members and the number of votes cast for the amendment(s) or approval. | |
| | There are no member adopted by the board | rs or members entitled to vote on the amendment(s). The amendment(s) was/wore to f directors. | |
| | Dated | lovember 21, 2016 | |
| | Signature _ | | _ |
| | hi | y the chairman or vice chairman of the board, president or other officer-if directors are not been selected, by an incorporator — if in the hands of a receiver, trustee, or ther court appointed fiduciary by that fiduciary) | |
| | | Daniel Goncalves Lopes Ribeiro | |
| | | (Typed or printed name of person signing) | |
| | | President | |
| | | (Title of person signing) | |

Page 5 of 5

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