## 151735

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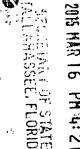
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The ROYAL Embassy Condomin	itum
DOCUMENT NUMBER: 751735	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lidia Aguilar (Name a Contact Person)	
The Royal Embassy Condominium	!
5750 COLLINS Avenue	
Miami Beach, FL 3314C (City/State and Zip Code)	
Rembassy 57 a) 9 mail · Com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LICIA Aguilar at (305) 868-3488 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee Scertificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address  A mendment Section  Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation

FILED

Royal Forbassy Co.	of .	1 - 2015 MAR LA PM 4:
(Name of Corporation as currently filed with the Flor	OMINIUM rida Dept. of State)	PISSOC TETTON
751735		TALLAHASSEE, FLOR
(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profi</i>	t Corporation adopts the following
A. If amending name, enter the new name of the corporation	on: N/A	The new
name must be distinguishable and contain the word "corporati "Company" or "Co," may not be used in the name.  B. Enter new principal office address, if applicable:	ion" or "incorporated" or th NA	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NJA	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac   Name of New Registered Agent:	e address in Florida, enter of diress:	the name of the
New Rugistered Office Address:	Florida street address)	3314A
(City) New Registered Agent's Signature, if changing Registered.	.1	Florida STTO (Zip Code)
I hereby accept the appointment as registered agent. I am fan	giliar with and accept the obl	
Signature of New I	Registered Agent, if changing	

Page 1 of 4

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 I V Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	<u>P</u>	cesar Buia	5750 collins Avenue Miami Beach FL, 33140
2) Change	<u>VP</u>	Candy Sicle	5750 collins. Avenue Miami Beach FL 3314()
Remove  3 )	D	Moms Shaffal	5750 Collins Avenue Miami Beach Fl 33140
4) Change Add Remove		Juan Davzog ku	5750 collins Avenue Mígmi Beach PL 33140
5) Change Add Remove	<u>S</u>	Mancel Olivered	5750 collins Avenue Miami Beach FL 33140
б) Change	<b>P</b>	Ronald Hams	
Add Remove			

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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President. Treasurer, Director would be PTD.$ 

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Example: X Change X Remove X Add		<u>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	5	Jonathan Hofma	n 11
Add Remove			
2) Change	<u>T</u>	Dons Dubay	
Add Remove 3)Change	P	- Ryan Banas	V
Add Remove		/	
4) Change Add			
Remove 5) Change			
Add Remove			
6) Change			
Add Remove			

(	attach a	iddittond	ıl sheets	, if nece.	ssary).	(Be sp	ter chan ecific)	<u> </u>	_				
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The date of each amendment(s) adoption:late this document was signed.					
Ette	ective date <u>if applicable:</u> (no more than 90 days after amendment file date)				
<b>A</b> do	option of Amendment(s) (CHECK ONE)				
Ø	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 2/19/15				
	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)				
	CESAR BUIA				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				