

755267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

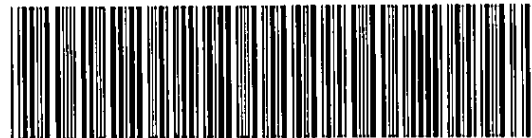
(Business Entity Name)

(Document Number)

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2018 OCT -2 PM 12:42
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Amend/CC
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OCT 02 2018

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Quinary Club Condominium Association, Inc.

DOCUMENT NUMBER: 755 267

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

Please return all correspondence concerning this matter to the following:

Grace Caldas
(Name of Contact Person)

Quinary Club Condominium Association, Inc
(Firm/ Company)

525 Coral Way Apt. 203
(Address)

Coral Gables, FL 33134
(City/ State and Zip Code)

QUINARYCONDO@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Grace Caldas at 305-807-1959
(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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

already paid
in previous
letter sent
ck has been
cashd by
Florida Dept.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 20, 2018

GRACE CALDAS
QUINARY CLUB CONDOMINIUM ASSOCIATION INC
525 CORAL WAY - UNIT 203
CORAL GABLES, FL 33134

SUBJECT: QUINARY CLUB CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 755267

We have received your document for QUINARY CLUB CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 918A00019599

RECEIVED
18 OCT -2 PM 12:07
SECRETARY
TALLAHASSEE

Articles of Amendment
to
Articles of Incorporation
of

QUINARY CLUB CONDOMINIUM ASSOCIATION, INC.

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

755267

(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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(Zip Code)

N/A

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.

N/A

Signature of New Registered Agent, if changing

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SOLICITORS
LAW FIRM

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 checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>PT</u>	<u>Jose Calderon</u>	<u>525 Coral Way</u> <u>Coral Gables, FL</u> <u>33134</u>
2) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>Grace Caldas</u>	<u>525 Coral Way</u> <u>Coral Gables, FL</u> <u>33134</u>
3) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>S</u>	<u>Adriana Tio</u>	<u>525 Coral Way</u> <u>Coral Gables, FL</u> <u>33134</u>
4) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>Fatima Rodriguez</u>	<u>525 Coral Way</u> <u>Coral Gables, FL</u> <u>33134</u>
5) <input checked="" type="checkbox"/> Change ____ Add ____ Remove	<u>D</u>	<u>Ali Karbasi</u>	<u>525 Coral Way</u> <u>Coral Gables, FL</u> <u>33134</u>
6) ____ Change ____ Add ____ Remove	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: April 26, 2018, if other than the date this document was signed.

Effective date if applicable: N/A
(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 April 26, 2018

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)

Grace Caldas

(Typed or printed name of person signing)

Director

(Title of person signing)