

F23000002859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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000408389970

*Amend*

FILED

RECEIVED

2023 MAY 31 AM 11:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 MAY 31 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

JUN - 1 2023



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations  
From: Alexxis Weiland-Sorenson  
Ext: 61592  
Date: 05/31/23  
Order #: 1218528-4  
Re: 2260 PARKVIEW OWNERS CORP.  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$ 43.75. FL State Account Number:  
120000000195

AUTHORIZATION:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the word 'AUTHORIZATION:'.

Please take the following action:

File in your office on basis

Issue *Certified Copy*

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: **2260 Parkview Owners Corp.**

Name of Corporation

DOCUMENT NUMBER: **F23000002859**

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Seth Liebenstein, Esq.**

Name of Contact Person

**Seyfarth Shaw LLP**

Firm/Company

**620 Eighth Avenue, 33rd FL**

Address

**New York, NY 10018**

City/State and Zip Code

**sliebenstein@seyfarth.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Mark Balsam**

Name of Contact Person

at ( **917** ) **7470411**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32311

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2115 N. Monroe Street, Suite 810  
Tallahassee, FL 32304

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**FILED**

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

**2023 MAY 31 AM 11: 38**

F23000002859

(Document number of corporation (if known))

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. 2260 Parkview Owners Corp.  
(Name of corporation as it appears on the records of the Department of State)
2. New York 3. May 15, 2023  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_
5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Vice President</u>	<u>Rebecca Blacker</u>	<u>200 East 65th Street, #15D, New York, NY</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>Director</u>	<u>Rebecca Blacker</u>	<u>200 East 65th Street, #15D, New York, NY</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Rebecca Blacker

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Rebecca Blacker

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**FILING FEE \$35.00**