# N00000003354

(Re	equestor's Name)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend Man 1/10

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: The Leslie Co	ndominium Association	, Inc.
DOCUMENT NUMI	BER: N00000003354	,	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	•
	Wen	di R. Rosen	
		Contact Person)	
	Wendi	R. Rosen, P.A.	
**	(Firm	n/ Company)	
	1 N.E. 1	st Street, #700	
	(2	Address)	
		i, FL 33132	
	(City/ Sta	te and Zip Code)	
		v@juno.com · d for future annual report notific	ation)
For further informatio	n concerning this matter, pleas	e cali:	
Wendi R. Rosen		at ( 305 - ) 379-175	5 <b>0</b>
(Name	of Contact Person)	(Area Code & Daytin	me Telephone Number)
Enclosed is a check for	r the following amount made'r	payable to the Florida Departmen	t of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations lox 6327 assee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Ci <b>rcle</b>



### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2010

WENDI R. ROSEN WENDI R. ROSEN, P.A. 1 N.E. 1ST STREET #700 MIAMI, FL 33132

SUBJECT: THE LESLIE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N00000003354

We have received your document for THE LESLIE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 110A00015213

2010 JUL -2 AM 8: 00

SECRETARY OF STATE

#### Articles of Amendment to · Articles of Incorporation of

The Leslie Condon	ninium Ass	ociation, Inc.	
(Name of Corporation as curren	tly filed with t	he Florida Dept. of Stat	<u>e</u> ) , , , , ,
N000	00003354		U
(Document Numb	er of Corporati	on (if known)	
Pursuant to the provisions of section 617.1006, F the following amendment(s) to its Articles of Income.		this Florida Not For Pro	ofit Corporation adopts
A. If amending name, enter the new name of t			
The new name must be distinguishable and con abbreviation "Corp." or "Inc." <mark>"Company" or</mark>			porated" or the
B. Enter new principal office address, if appli-		c/o Wendi R. Rosen	, P.A.
(Principal office address <u>MUST BE A STREET</u>		1 N.E. 1st Street, St	uite 700
		Miami, FL 33132	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E <i>BOX</i> )	c/o Wendi R. Rosen	
		1 N.E. 1st Street, Su	ite 700
		Miami, FL 33132	<del></del>
D. If amending the registered agent and/or renew registered agent and/or the new regist			r the name of the
Name of New Registered Agent:	Wendi R. Rosen, P.A.		<u>,</u>
		t Street, Suite 700	
New Registered Office Address:	(Flori	ida street address)	•
		Miami	, Florida 33132 (Zip Code)
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered		gent: familiar with and accept	the obligations of the

. Page 1 of 3

Signature of New Registered Agent, if changing

position.

## 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Sec	Jorge Peraza	503 NW 91st Street Miami, FL 33150	☑ Add ☐ Remove
Treas	Liz St. Aubin	1325 Meridian Ave. #3 Miami Beach, FL 33139	□ Add ☑ Remove
Treas	Wendi R. Rosen	1 N.E. 1st Street, Suite 700 Miami, FL 33132	
	ding or adding additional Articles, e dditional sheets, if necessary). (Be s		
		• I	telline the discount of the state of the sta
			••

## 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)

<u>Title</u>	Name	Address	Type of Action
<u>Pres</u>	Juan C. Nadal	1325 Meridian Avenue #3 Miami Beach, FL 33139	☐ Add ☑ Remove
Pres	Juan C. Nadal	MIANI, FL 33132	Add Remove
· · ·			☐ Add ☐ Remove
E. If amending (attach addit	g or adding additional Articles, enter clional sheets, if necessary). (Be specific	hange(s) here: ;)	
***		***************************************	
	· · · · · · · · · · · · · · · · · · ·		
	<u> </u>		,

The date of each amendment(	s) adoption:	· · · · · · · · · · · · · · · · · · ·
Effective date <u>if applicable</u> :	(date of adoption is required)  (no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for thoval.	ne amendment(s)
There are no members or madopted by the board of dire	embers entitled to vote on the amendment(s). The amendment extors.	nt(s) was/were
Dated	6/4/10	
Signature	Mar	
(By have	the chairman or vice chairman of the board, president or othe not been selected, by an incorporator – if in the hands of a court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
· .	(Typed of printed name of person signing)	
	Treasurer	
•	(Title of person signing)	

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