## N00 000005816

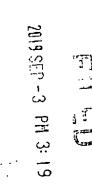
(Requestor's Name)					
(Addrags)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Chi) Cotto Zipi. Notic ii)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





000333525350

09/03/19--01033--012 \*\*35.00



C. GOLDEN SEP 1 3 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

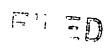
MIROMAR L. NAME OF CORPORATION:	AKES MASTER ASSOCIATION, INC.
N00000005816 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	matter to the following:
MARK W. GESCHWENDT, ESQ.	
	(Name of Contact Person)
MIROMAR DEVELOPMENT CORPORATIO	N N
	(Firm/ Company)
10801 CORKSCREW RD., SUITE 305	
	(Address)
ESTERO, FL 33928	
	(City/ State and Zip Code)
MGESCHWENDT@MIROMAR.COM	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	please call:
RACHEL MARKS	(239) 390-5100 at
(Name of Contact F	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of S	Fee & \$\subseteq\$
Mailing Address  Amendment Section	Street Address Amendment Section
Amenament section	ranchaniem section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## Articles of Amendment to Articles of Incorporation of



MIROMAR LAKES MASTER ASSOCIATION, INC.		2019 SEP -3	PH 3			
(Name of Corporation as currently filed with the Florida Dept. of State)						
N00000005816						-
(Досил	nent Number	of Corpora	tion (if known)			·
Pursuant to the provisions of section 617.1006, Flor imendment(s) to its Articles of Incorporation:	rida Statutes, t	his <i>Florid</i> e	a Not For Profit	t Corporation	adopts the foll	owing
. If amending name, enter the new name of the	e corporation	<u>:</u>				
N/A					Tl.	e new
name must be distinguishable and contain the word Company" or "Co." may not be used in the name	<u>e</u> .		orporated" or th	e abhreviatio		
3. Enter new principal office address, if applica	<u></u>	!/A				
Principal office address <u>MUST BE A STREET A</u>	<u>(DDRESS</u> )					
	_		- · · · <del>-</del>			
	_	<del></del>				
Enter new mailing address, if applicable:	N	!/A				
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u> )			<del></del> -		
	_					
	_					<del></del>
D. If amending the registered agent and/or regis			Florida, enter t	the name of	<u>the</u>	
new registered agent and/or the new register		ress:				
Name of New Registered Agent:	N/A					
N B 1 100 11			(Florida sırı	eet address)		
New Registered Office Address:						
	N/A				ida	
		(City)		(Z	ip Code)	
ew Registered Agent's Signature, if changing I	Registered Ag	ent:				
hereby accept the appointment as registered agen			nd accept the obl	igations of th	ie position.	
<del>-</del>	Sign	ature of No	ew Registered As	gent, if chang	ging	<del></del>

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	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>s</u>	MICHAEL FABIAN	10801 CORKSCREW RD
Add			STE 305
X Remove			ESTERO, FL 33928
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti- (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
<u>-</u>	
·	

The date of each amendmen date this document was signe		ther than the
Effective date if applicable:	August 30, 2019	
Enterior date in apparease.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not be liste the Department of State's records.	d as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members o adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	7/31/19	
Signature	- Mm/	
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Т	IM BYAL	
	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	