100645

(Re	questor's Name)	
, (Ad)	dress)	
, .u	41000)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
	*	
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Control of the Contro	
	*	
	* ý	





200210091942

07/20/11--01016--003 **43.75

SECRETARY OF GRAPE

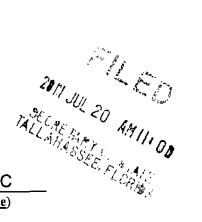
2111 JUL 20 AH 10: 5:

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BEL-KISS PLA	AZA CONDOMINIUM A	ASSOCIATION IN
DOCUMENT NUM	ивек: <u>N00645</u>		
The enclosed Article	es of Amendment and fee are sub	mitted for filing.	
Please return all cor	respondence concerning this matt	ter to the following:	
· •	IVA	N NIEVES	
	(Name of	Contact Person)	
	BEL-KISS PLAZA COND	OOMINIUM ASSOCIATION	INC
	(Firm	/ Company)	
	409 \	W VINE ST	
	· · ·	Address)	
	KISSIMI	MEE FL 34741	ω_0
	(City/ Sta	te and Zip Code)	THE CONTRACTOR
		etax@bellsouth.net	• • • • • • • • • • • • • • • • • • • •
	E-mail address: (to be use	d for future annual report notific	cation)
For further informat	ion concerning this matter, please	e call:	•
			•
IVAN NIEVES		at (407) 381-61 (Area Code & Dayt	37
(Nam	e of Contact Person)	(Area Code & Dayt	ime Telephone Number)
Enclosed is a check	for the following amount made p	ayable to the Florida Departmen	nt of State:
☐ \$35 Filing Fee		☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee Certificate of Status
		(Additional copy is enclosed)	Certified Copy (Additional Copy is enclosed)
<u>Ma</u>	iling Address	Street Address	,
	endment Section ision of Corporations	Amendment Section Division of Corporate	ions
	Box 6327	Clifton Building	.,
	ahassee, FL 32314	2661 Executive Cent Tallahassee, FL 3230	

Articles of Amendment to Articles of Incorporation of



BEL-KISS PLAZA CONDOMINIUM ASSOCIATION INC

(Name of	Corporation a	s currently i	filed with the	: Florida D	ept. of State)

	N00645	
(Document Nu	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of I		Profit Corporation adopts
A. If amending name enter the new name of	of the corporation:	
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company"		corporated" or the
B. Enter new principal office address, if app Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
 If amending the registered agent and/or new registered agent and/or the new reg 		iter the name of the
Name of New Registered Agent:	IVAN NIEVES	
	1486 S SEMORAN BLVD	
New Registered Office Address:	(Florida street address)	
	ORLANDO	, Florida 32807
	(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registere position.		ept the obligations of the

Page 1 of 3

Signature of New Registered Agent, if changing

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>	Address	Type of Action
<u>TD</u>	NAIDA MARQUEZ	3760 CORD AVE SAINT CLOUD FL 34772	☐ Add ☑ Remove
**			
E. If amen	ding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
· · · · · · · · · · · · · · · · · · ·			
	.		
· · · · · · · · · · · · · · · · · · ·	<u> </u>		

The date of each amendment(s)	adoption:
Fice -4: d-4. ic i	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
✓ The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s)
There are no members or mem	abers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 107/13/1	1
Signature	Duan Illes.
have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or burt appointed fiduciary by that fiduciary)
, p	IVAN NIEVES
**************************************	(Typed or printed name of person signing)
	VICE PRESIDENT
	(Title of person signing)

Page 3 of 3