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COR AMND/RESTATE/CORRECT OR O/D RESIGN
VENETIAN ISLES MASTER ASSOCIATION, INC.

 $exttt{!*Enter}$ the email address for this business entity to be used for future ϵ_{co} annual report mailings. Enter only one email address please.**

Certificate of Status	0
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Articles of Amendment to Articles of Incorporation of

VENETIAN ISLES MASTER ASSOCIATION, INC.				
(Name of Corporation as currently filed with the Flori	da Dept. of State)			
N01000003751				
(Document No	imber of Corporation	(if known)		_
Pursuant to the provisions of section 617.1006, Florida Stramendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Ne</i>	et For Profit Corporation ado	pts the follo	wing
A. If amending name, enter the new name of the corpo	ration;			
name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name.	oration" or "incorpol	rated" or the abbreviation "Co	The orp." or "In	new IC."
3. Enter new principal office address, if applicable:				
Principal office address MUST BE A STREET ADDRE	<u>SS</u>)			_
		<u> </u>		
				024
Enter new mailing address, if applicable:				ال
(Mailing address MAY BE A POST OFFICE BOX)			i	
			支票	9
			225	
			- 1	
. If amending the registered agent and/or registered of	office address in Flor	ida, enter the name of the	11; 	<u>-</u>
new registered agent and/or the new registered offic	e address;		1,1	
Name of New Registered Agent:			• •	
	· · · · · · · · · · · · · · · · · · ·	(Florida street address)		
New Registered Office Address:		·		
		, Florida		
	(City)	(Zip Code	e)	
ew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ed Agent: familiar with and acc	ept the obligations of the posit	tion.	
	<u> </u>			
	Signature of New Reg	gistered Agent, if changing		

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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	PT John D V Mike J SV Sally S	<u>fones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	STD	MOLIERI, EDUARDO	2950 NORTH 28TH TERRACE HOLLYWOOD, FL 33020
2) Change Add			202) JUI; 79 SECRET/ALL AIH
Remove 3) Change Add Remove	 		200 F
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add	····		
Remove E. If amending or addir (attach additional shee	ng additional Arti	icles, enter change(s) here: (Be specific)	

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		101
The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date if applicable:		
Zitetit vate <u>ii applicative</u> ,	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requiremer partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the number of votes cast for the	e amendment(s)

adopted by the board-of-directors.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

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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)

Eduardo Lester García

(Typed or printed name of person signing)

(Title of person signing)

2024 JUL -9 AMII: 14