NU20000 5844

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COVER LETTER

Division of Corporations M RESORT RESIDENCES CONDOMINIUM ASSOCIATION, INC. NAME OF CORPORATION: N02000005844 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael B. Moskowitz, CPA (Name of Contact Person) Michael B. Moskowitz, CPA (Firm/ Company) 2881 E. Oakland Park Blvd., Ste. 409 (Address) Fort Lauderdale, FL 33306 (City/ State and Zip Code) info@mikemoskowitzcpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael B. Moskowitz (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



M RESORT RESIDENCES CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N02000005844 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Page 1 of 4

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: XChange X Remove X Add	<u>V</u> <u>Mil</u>	n Doe se Jones sy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TD	Luisa Longo	18683 Collins Ave
Add			Sunny Isles Beach, FL
X Remove			33160
2) D Change	D	Dario Erlich	18683 Collins Ave
Add			Sunny Isles Beach, FL
X Remove			33160
3) X Change	TD	Miguel Pinzon	18683 Collins Ave
Add			Sunny Isles Beach, FL
Remove			33160
4) Change	SD	Nir Gavra	18683 Collins Ave
X Add			Sunny Isles Beach, FL
Remove			33160
5) Change	D	Alejandro Rakover	18683 Collins Ave
X Add			Sunny Isles Beach, FL
Remove			33160
6) Change	<u></u> .		
Add			
Remove			

L. If amending or adding additional Artic (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)

	~-1 l
The date of each amendment(s) ad-	option: 05 212013
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 adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s
Dated Signature	HA South
(By the chairs have not bec	than of vice chairman of the board, president or other officer-if directors in selected, by an incorporator — if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
<u></u>	RESIDEND