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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION COLOROW	1 NO\$ 1NA	DUSTRIAL PARIC	andra	م المار
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NAME OF CORPORATION (OLORIAN)	29462	71,550.		
The enclosed Articles of Amendment and fee are subm				
Please return all correspondence concerning this matte				
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ASSOCIADONINC	(Firm/ Company)	<u> </u>		
	(Firm/ Company)			
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_ '	(Address)		024 16	
HALOAH FLOR	21DA 33	016	924 MAR 2	
	(City/ State and Zip Cod	e)	ीं हैं	
COLORAMA 3 TPCAC E-mail address: (to be used	Tor future annual report	hall con	12 (23 1916 12 3 1916 14 3 14 1	
For further information concerning this matter, please	call:			
to rather morning to continue the content present				
JAMES YIN (Name of Contact Person)	at _	3052180	310	_
(Name of Contact Person)	) (Ai	rea Code) (Daytime Telepl	hone Number)	
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State:		
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		
<b>Mailing Address</b>		Address		
Amendment Section		Iment Section of Corporations		
Division of Corporations P.O. Box 6327		entre of Tallahassee		
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



March 6, 2024

JAMES YIN 8000 W 24 AVE BAY #6 HIALEAH, FL 33016

SUBJECT: COLORAMA NO. 3 INDUSTRIAL PARK CONDOMINIUM

ASSOCIATION, INC.

Ref. Number: N03000009462

We have received your document for COLORAMA NO. 3 INDUSTRIAL PARK 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 form you submitted is for a Florida profit corporation, but your entity is a Florida not for profit corporation. Please complete and return the enclosed blank form(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) 245-6050.

Letter Number: 124A00004942

Morgan E Lovett Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment

to

Articles of Incorporation

of

COL RAMA NO 3 /WOUSTRA (Name of Corporation as currently filed with the Florida I	AL PARIC CONDOMINIUM ASSOCI
N0300009462	· ·
	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
NIA	_The new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	NIA
C. Enter new mailing address, if applicable:	26 T
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	(7) To good
	ب <u>۱۳۰۶</u> ی است
D. If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a	ce address in Florida, enter the name of the address:
Name of New Registered Agent:	JAMES YW
ea	DO WZYAUE BAY 6
New Registered Office Address:	(Florida street address)
HIA	
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa-	
	1/4
Si	ignature 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)

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	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	P	FADY GIRGIS	BOW WZYAVEBAYES
Remove  2) Change Add	P	JAMES YIN	HIAWAH, FLORIDA 33016 BODWZYANEBAY#C
Remove 3 ) Change Add Remove			HIALGAIL FLORIDASSOIL
4) Change Add			
Remove  51 Change Add			
Remove  Change Add	/		
E. If amending or addi (attach additional she		ticles, enter change(s) here: (Be specific)	
	VIA		

•
The date of each amendment(s) adoption:
Effective date if applicable: 03155 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.					
Dated X 3/23/24 Signature X					
(By the 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)					
X FADY GIRGIS (Typed or printed name of person signing)					
(Title of person signing)					