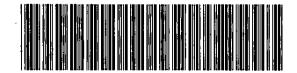
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Certified Copies	Certificates of	f Status
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COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Lincoln Me	ews Condomin	ium Association, Inc
DOCUMENT NUMBER: NO30001	0780	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Stephanie Harris		
	(Name of Contact Person)
	(Firm/ Company)	
PO Box 190504		
	(Address)	
Miami Beach, FL 331	19	
	(City/ State and Zip Code	:)
stephanieharris	70@hotma	il.com
·	d for future annual report i	notification)
For further information concerning this matter, please	e call:	
Stephanie Harris	_{at (} 305	335-7442
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle assee, FL 32301

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 I V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add Remove	<u>P</u>	Tara A Harris	PO Box 190504 Miami Beach, FL 33119
2) Change X Add Remove	<u>P</u>	Stephanie Harris	PO Box 190504 Miami Beach, FL 33119
3) X Change — Add — Remove	<u>s</u>	Thomas Bott	1350 NW 8th Ct #102 Miami, FL 33136
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove	·		

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amending or adding additional Artice tach additional sheets, if necessary).				
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendm was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/w adopted by the board of directors.	⁄ere
December 2, 2013	
Signature Wood	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator — if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	
Stephanie Harris	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Tara Harris	, hereby resign as President	
of Lincoln Mews Cond	dominium Association, Inc	
(Name of C	Corporation)	
N03000010780 (Document Number, if known)	a corporation organized under the laws of the State of	
Florida		
Jake Min		
(Sign	ature of resigning officer/director)	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314