

From: Baldy Martinez  
9/30/2019

Fax: 13056151371

To:

Fax: (850) 617-6380

Page: 1 of 6

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Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : BALDY MARTINEZ P.A.  
Account Number : 120110000042  
Phone : (305)454-5804  
Fax Number : (305)454-5808

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
SHEMART VILLAS CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Shemart Villas Condominium Association, Inc.

DOCUMENT NUMBER: N03733

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Sanchez

(Name of Contact Person)

Shemart Villas Condominium Association, Inc.

(Firm/ Company)

1460 West 43 Place

(Address)

Hialeah, FL 33012

(City/ State and Zip Code)

sanchez2749@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Sanchez

786

570-7165

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 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

Street Address

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

Articles of Amendment  
to  
Articles of Incorporation  
of

Shemart Villas Condominium Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N03733

(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:

*The new 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)

American Management and Realty, Inc.

1691 West 37 Street #33

Hialeah, Florida 33012

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: American Management and Realty, Inc.

1691 West 37 Street #33

(Florida street address)

New Registered Office Address:

Hialeah

(City)

Florida 33012

(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

19 SEP 30 AM 9:41

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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; VP = 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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PD	Nilda Perdomo	1275 West 47 Place
<input type="checkbox"/> Add			Suite 303
<input checked="" type="checkbox"/> Remove			Hialeah, FL 33012
2) <input type="checkbox"/> Change	SD	Hector Hernandez	1275 West 47 Place
<input type="checkbox"/> Add			Suite 303
<input checked="" type="checkbox"/> Remove			Hialeah, FL 33012
3) <input type="checkbox"/> Change	P	Daniel Sanchez	1460 West 43 Place
<input checked="" type="checkbox"/> Add			Suite 107
<input type="checkbox"/> Remove			Hialeah, FL 33012
4) <input type="checkbox"/> Change	T	Lilbrada M. Paz	1460 West 43 Place
<input checked="" type="checkbox"/> Add			Suite 201 & 207
<input type="checkbox"/> Remove			Hialeah, FL 33012
5) <input type="checkbox"/> Change	S	Aida Cruz Hernandez	1460 West 43 Place
<input checked="" type="checkbox"/> Add			Suite 105
<input type="checkbox"/> Remove			Hialeah, FL 33012
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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CLERK OF DISTRICT COURT  
1101 N. MIAMI AVE.  
MIAMI, FL 33132

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

Lined area for amending or adding additional Articles.

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JACKSONVILLE, FLORIDA

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(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.

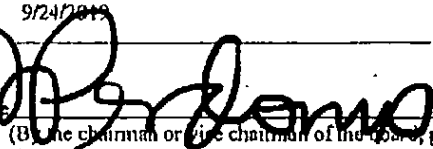
Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast 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

9/24/2019

Signature



(If 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)

Nilda Perdomo

(Typed or printed name of person signing)

President

(Title of person signing)

FILED  
19 SEP 30 AM 9:42  
STATE  
TALLAHASSEE FL 32304