

12-12-22

N04 000007157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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2023 DEC 12 PM 7:19

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 29, 2022

TATIANA SANCHEZ  
LATITUDE RIVERFRONT PLAZA MASTER ASSOC  
185 SW 7 STREET, STE 1200  
MIAMI, FL 33130

SUBJECT: LATITUDE RIVERFRONT PLAZA MASTER ASSOCIATION, INC.  
Ref. Number: N04000007157

We have received your document for LATITUDE RIVERFRONT PLAZA MASTER 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 Profit Corporation, but your entity is a 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) 245-6862.

Sean Toner  
Director

Letter Number: 222A00026218

*Correct Form Attached*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

FILED

NAME OF CORPORATION: LATTITUDE RIVERFRONT PLAZA MASTER ASSOCIATION, INC. 2023 DEC 12 PM 12:19

DOCUMENT NUMBER: N04000007157

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

Please return all correspondence concerning this matter to the following:

TATIANA SANCHEZ

(Name of Contact Person)

LATTITUDE RIVERFRONT PLAZA MASTER ASSOCIATION, INC

(Firm/ Company)

187 SW 8 STREET, STE A

(Address)

MIAMI, FL 33130

(City/ State and Zip Code)

TSANCHEZ@PEABODYPROPERTIES.COM

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

For further information concerning this matter, please call:

JACQUELINE GARCIA

305

358-1134

at

(Name of Contact Person)

(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

LATITUDE RIVERFRONT PLAZA MASTER ASSOCIATION, INC

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

N04000007157

(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)

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:

(City)

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

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

1) \_\_\_\_\_ Change  
\_\_\_\_\_ Add

SECRET

TATIANA SANCHEZ

187 SW 7 STREET  
STE A

<u>x</u>	Remove
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MIAMI, FL 33130

2)  $\frac{\text{Change}}{\text{Add}}$

SECRET

JACQUELINE GARCIA

187 SW 7 STREET  
STE A

         Remove

MIAMI, FL 33130

3 ) ☐ Change  
☐ Add  
☐ Remove

4) \_\_\_\_\_ Change  
\_\_\_\_\_ Add

         Remove

5) \_\_\_\_\_ Change  
\_\_\_\_\_ Add

Remove

6) \_\_\_\_\_ Change  
\_\_\_\_\_ Add

Remove

**E. If amending or adding additional Articles, enter change(s) here:**

(attach additional sheets, if necessary). (Be specific)

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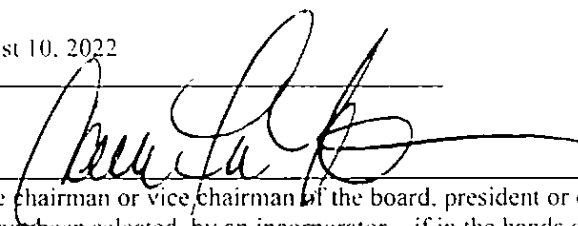
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☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ 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 August 10, 2022

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)

Karen Fish-Will

(Typed or printed name of person signing)

President

(Title of person signing)