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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO		Grove Condominium As	ssociation,	Inc.
DOCUMENT NUMBER:	N0400009309			
The enclosed Articles of Am				
Please return all corresponde	nce concerning this matter	r to the following:		
Francisco Rey				
		(Name of Contact Perso	n)	
FGR Property Management,	Inc			
<u> </u>	<del>-</del>	(Firm/ Company)		
6721 SW 159 Place				
		(Address)		
Miami, FL 33193				
	(	(City/ State and Zip Cod	le)	
fgrmanagementinc@gmail.c	om			
E	-mail address: (to be used	for future annual report	notification	1)
For further information conce	erning this matter, please of	call:		
Francisco Rey		78 at	86-521-314	6
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	vable 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)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A Amendmen			Address dment Sect	ion

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

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

#### Articles of Amendment to Articles of Incorporation of

## MISSION PLACE AT THE GROVE CONDOMINIUM ASSOCIATION, INC.

# (Name of Corporation as currently filed with the Florida Dept. of State) N0400009309

(Document Nu	umber of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation ac	dopts the	following
A. If amending name, enter the new name of the corpor	ration:		
			_The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name	oration" or "incorporated" or the abbreviation	Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>ss</u> )		
	-		
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>			2016
		***	
			#13 
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the		779
new registered agent and/or the new registered office		,	
Name of New Registered Agent:		•	پ
Name of New Negistered Agent.			
New Registered Office Address:	(Florida street address)		
	, Florida	·	
,	(City) (Zip (	Code)	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		osition.	
	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: X Change X Remove X Add	V Mil	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PT	Rene Bendana	3116 Bird Ave
Add			Miami, FL 33133
X Remove			
2) Change	TV	Susan Hyde	3100 Bird Ave
X Add			Miami, FL 33133
Remove			
3) X Change	<u>P</u>	Nicole Amaro	3112 Bird Ave
Add			Miami, FL 33133
Remove			
4) X Change	S	Nicholas Simmons	3106 Bird Ave
Add			Miami, FL 33133
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

f amending or adding additional Ar utach additional sheets, if necessary).	(Be specific)				
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		***************************************			

	e date of each amendment(s) adoption: <u>2/23//6.</u> e this document was signed.	, if other than the
	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be sument's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
	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 $\frac{3/1/2016}{4}$	
	Signature // Signa	-
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President. (Title of person signing)	