## N64000011488

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	Havana Moon Condo	minium Associatio	n, Inc.	· · · · · · · · · · · · · · · · · · ·	·	
DOCUMENT NUMBER	N04000011488					
The enclosed Articles of A	mendment and fee are subm	nitted for filing.				
Please return all correspon	dence concerning this matte	r to the following:				
Max Berney						
		(Name of Contact I	Person)			<del></del>
Whyhorn Mgmt, LLC						
		(Firm/ Compar	ıy')			
514 NW 79th St						
·		(Address)			····	
Mianti, FL 33150						
1-11-11-1		(City/ State and Zip	Code)		- 4.42	
whyhorn1@gmail.com						
	E-mail address: (to be used	for future annual re	port no	nficatio	n)	
For further information co	ncerning this matter, please	call:				
Dec Bryant		9	305 t		308-9945	
	(Name of Contact Person)			Code)	(Davtime Tele	phone Number)
		٠,				
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	Address	_	treet Ad		ion	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

FILED

(Name of Corporation as currently filed with the	e Florida De	ept. of State)	2024 JUL 23	PM 2. 20
Havana Moon Condominium Association, Inc. N	0400001148	8		
(Docun	nent Number	r of Corporation (if known)	<del>- SEUKEYAR Y</del> TALLAHAS	UF STATE
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Not For Profit C</i>		
A. If amending name, enter the new name of the	e corporatio	on:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporated" or the a	bbreviation "Corp	
B. Enter new principal office address, if applica	514 NW 79th St			
(Principal office address <u>MUST BE A STREET A</u>	Obberce	Miami, FL 33150		
	-			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	- <u>BOX</u> ) .	N/A		<del>_</del>
	-			
D. If amending the registered agent and/or reginew registered agent and/or the new register			name of the	
Name of New Registered Agent:	N/A			
in the second of	514 NW 79	Oth St		
New Registered Office Address:	·	(Florida street i	address)	
	Miami, FL		. Florida 3315	50
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			tions of the positio	n.
-	Sign	nature of New Registered Agen	t, 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	PT         John De           V         Mike Jo           SV         Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change Add	<u>T</u>	Eugenia Bermudez	P.O. Box 398912 Miami Beach, FL 33239
X Remove  2) Change Add	<u>T</u>	Miriam Garcia de Caro	P.O. Box 398912 Miami Beach, FL 33239
Remove  3 ) Change Add Remove			
4) Change Add			
Remove  5) Change Add			
Remove			
6) Change Add Remove	***************************************		
	g additional Arti ts. if necessary).	cles, enter change(s) here: (Be specific)	
-			

•		
	***	<del></del>
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	. <u></u>	<del></del>
		<del></del>
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The date of each amendment(s) adoption:	7/12/24	if ather then the
date this document was signed.		. It other than the
Effective date if applicable: 7/12/24	o more than 90 days after amendment file date)	
(n	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be tof State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

Dated	7/15/24
Dilled	
Signatu	re <del>de l'accessore</del>
	(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)
	Katherine Jaramillo
	(Typed or printed name of person signing)