

N 05 000000160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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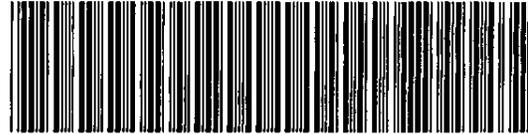
(Business Entity Name)

(Document Number)

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11 DEC 29 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N05000000160  
Ann  
1/9/11





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 1, 2011

GREG K. GONZALEZ  
5201 BLUE LAGOON DR., STE 800  
MIAMI, FL 33126

SUBJECT: GALIANO CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N05000000160

We have received your document for GALIANO CONDOMINIUM 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):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 911A00026915

Articles of Amendment  
to  
Articles of Incorporation  
of

**GALIANO CONDOMINIUM ASSOCIATION, INC.**

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

**N05000000160**

(Document Number of Corporation (if known))

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TALLAHASSEE, FLORIDA

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**)

**5201 BLUE LAGOON DR STE 800**

**MIAMI, FL 33126**

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**5201 BLUE LAGOON DR STE 800**

**MIAMI, FL 33126**

**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:*

**GREG K GONZALEZ, CPA**

**5201 BLUE LAGOON DR STE 800**

(Florida street address)

*New Registered Office Address:*

**MIAMI**

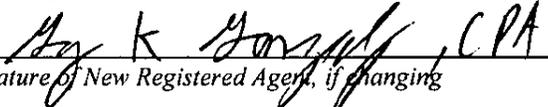
(City)

**Florida 33126**

(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





The date of each amendment(s) adoption: 11/22/2011

Effective date if applicable: 11/22/2011  
*(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 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 11/22/2011

Signature Gabriel Requena

(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)

**GABRIEL REQUENA**  
\_\_\_\_\_  
(Typed or printed name of person signing)

**VICE PRESIDENT**  
\_\_\_\_\_  
(Title of person signing)