## N05000003089

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		:





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05/22/09--01031--012 \*\*43.75

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Amend Theurs 6-10-09

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

			-1
NAME OF CORPO	PRATION: WYPLOOD	od Lofts Condo	Association
DOCUMENT NUM	BER: <u>105000</u>	0003089	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Angela Co	oates f Contact Person)	
	(Name o	f Contact Person)	
	Solutions	RE	
<del></del>	(Firm	n/ Company)	
	25 XIE 10+	h ()	
<del></del>	35 ME 40th St. (Address)		
	Miami, FL	33137	
Miami, FL 33137 (City/ State and Zip Code)			
	E-mail address: (to be use	najestic mian differ future annual report notific	<u>i.com</u>
For further information	on concerning this matter, please	e call:	
Anaela	Coates	at ( <u>805</u> ) <u>677</u> (Area Code & Daytii	-5000
(Name	of Contact Person)	(Area Code & Daytin	me Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the Florida Departmen	t 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)
	ng Address	Street Address	<b></b> ,
	dment Section on of Corporations	Amendment Section Division of Corporation	ne.
	lox 6327	Clifton Building	113
	assee, FL 32314	2661 Executive Center	· Circle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 28, 2009

ANGELA COATES SOLUTIONS RE 35 NE 40TH STREET MIAMI, FL 33137

SUBJECT: WYNWOOD LOFTS CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N05000003089

We have received your document for WYNWOOD LOFTS CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If there are <u>MEMBERS ENTITLED TO VOTE</u> on a proposed amendment, the document must contain: (1) the date of adoption of the amendment by the members and (2) a statement that the number of votes cast for the amendment was sufficient for approval.

If there are <u>NO MEMBERS OR MEMBERS ENTITLED TO VOTE</u> on a proposed amendment, the document must contain: (1) a statement that there are no members or members entitled to vote on the amendment and (2) the date of adoption of the amendment by the board of directors.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

SECRETARY OF SALUAMASSEE, FL

Letter Number: 409A00017990

## Articles of Amendment to Articles of Incorporation of

Name of Corporation as curre	rdomin	1UM ASSOCI	ation, Inc
M0500000			<u></u> ,
(Document Num		ion (if known)	
Pursuant to the provisions of section 617.1006, I the following amendment(s) to its Articles of Inc.  A. If amending name, enter the new name of	corporation:		ofit Corporation adopts
The new name must be distinguishable and con	ntain the word	"corporation" or "inco	rporated" or the
abbreviation "Corp." or "Inc." "Company" or  B. Enter new principal office address, if appli (Principal office address MUST BE A STREET)	cable:	be used in the name.	F STATE A. FLORIDA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u> )	clo Solutio 35 NE 40+1 Miami, Fi	rSt.
D. If amending the registered agent and/or renew registered agent and/or the new registered		address in Florida, ente	
Name of New Registered Agent:			
New Registered Office Address:	(Floria	la street address)	
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.		ent: amiliar with and accept	the obligations of the
Sig	nature of New I	Registered Agent, if chang	zing

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)

<u>Title</u>	<u>Name</u>	Address #81	Type of Action
VPD	Patrich Lingle	250 NW 23rd St Miami, FL 33187	
VPD	Demet hoc	250 NW 28rd St # 4060 Miami, FL 3313	Add Remove
PD	Seth Beitler	250 NW DBra St. #202 Miami, FL 3312 250 NW DBra St. Miami, FL 3312 change(s) here:	Add Remove
STD	Yvette Carcia	250 NW Dard St.	#200 J
E. If amending (attach addit	g or adding additional Articles, enter continual sheets, if necessary). (Be specific	change(s) here:	'Exchange Title
	·	<del> </del>	<del> </del>
		· · · · · · · · · · · · · · · · · · ·	
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The date of each amendment(s) adoption: 5009
Effective date if applicable: 5 U 09  (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.
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)
Seth Beitley (Typed or printed name of person signing)
President (Title of person signing)