

NO5000005820

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000004427 3)))



H120000044273ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : RITTER, ZARETSKY & LIEBER, LLP
Account Number : I20010000015
Phone : (305) 372-0933
Fax Number : (305) 704-8111

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: olieber@r2llaw.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN -6 AM 10:43

FILED

RECEIVED

12 JAN -6 AM 8:03

TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
THE TIDES SOUTH BEACH CONDOMINIUM RESORT
ASSOCIATION**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Amend

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE TIDES SOUTH BEACH CONDOMINIUM RESORT ASSOCIATION, INC.

DOCUMENT NUMBER: N05000005820

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

Please return all correspondence concerning this matter to the following:

OREN LIEBER, ESQ.

(Name of Contact Person)

RITTER ZARETSKY & LIBER, LLP

(Firm/ Company)

2915 BISCAYNE BLVD. SUITE 300

(Address)

MIAMI, FLORIDA 33137

(City/ State and Zip Code)

OLIEBER@RZLLAW.COM

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

For further information concerning this matter, please call:

OREN LEIBER, ESQ.

(Name of Contact Person)

at (305) 372-0933

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

12 JAN -6 AM 10:43

THE TIDES SOUTH BEACH CONDOMINIUM RESORT ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N05000005820

(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:

OREN LIEBER, ESQ.

New Registered Office Address:

2915 BISCAYNE BLVD. SUITE 300

(Florida street address)

MIAMI

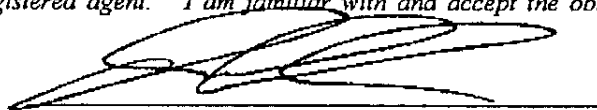
(City)

Florida 33137

(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, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.
 (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>D/P</u>	<u>ARI PEARL</u>	<u>1220 OCEAN DRIVE</u> <u>MIAMI BEACH, FLORIDA 33139</u>
2) <u>D/V P</u>	<u>MEYER CHETRIT</u>	<u>1220 OCEAN DRIVE</u> <u>MIAMI BEACH, FLORIDA 33139</u>
3) <u>D</u>	<u>W. EDWARD SCHEETZ</u>	<u>1220 OCEAN DRIVE</u> <u>MIAMI BEACH, FLORIDA 33139</u>
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) <u>D/T</u>	<u>Jason Herthel</u>	4) _____	_____
2) <u>D/NP</u>	<u>Shan Kanagasingham</u>	5) _____	_____
3) <u>D/P</u>	<u>Bradford Korzen</u>	6) _____	_____

No. 2241 P. 5/6

Blank lined paper for writing.

The date of ³each amendment(s) adoption: November 14, 2011
(date of adoption- required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

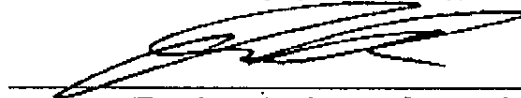
☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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 November 14, 2011

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)



Oren Lieber

(Typed or printed name of person signing)

Oren Lieber, Authorized Agent

(Title of person signing)