## NOS 000006692

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## TO: Amendment Section Division of Corporations NAME OF CORPORATION: INSPIRATION POINT CONDOMINIUM ASSOCIATION, INC. DOCUMENT NUMBER: NOSO00006692 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: $K_{aren\ Alvarado}$ (Name of Contact Person) $s_{MGQ}$ $L_{aw}$ (Firm/Company) <sup>20</sup>1 Alhambra Circle, Sune 1205 (Address) Coral Gables, FL 33134 For further information concerning this matter, please call: (City/ State and Zip Code) Is-mail address: (to be used for luture annual report notification) $K_{aren\ Alvarado}$ Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee US43.75 Filing Fee & US43.75 Filing Fee & Confiling Fee & Confiling Fee & (Daytime Telephone Number) Cenified Copy (Additional copy is Mailing Address US52.50 Filing Fee Amendment Section Division of Corporations Certificate of Status Centified Copy P.O. Box 6327 (Additional Copy is Tallahassee, FL 32314

Enclosed)

Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Stiffe 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

INSPIRATION POINT CONDOMINIUM ASSOCIATION, INC.

Name of Corporation as currently filed with the	<u>e Fiorida De</u>	pr. or State)			
N05000006692					
(Docum	nent Number	of Corporation (if kno	wn)		
Pursuant to the provisions of section 617.1006. Flor imendment(s) to its Articles of Incorporation:	orida Statutes	, this Florida Not For	Profit Corpora	<i>tion</i> adopts th	ne following
A. If amending name, enter the new name of the	e corporațio	<u>n:</u>			
					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 abbrevi	ation "Corp."	" or "Inc."
B. Enter new principal office address, if applica	able <sup>,</sup>	14050 NE 6th Avenue,	Suite 100		
Principal office address MUST BE A STREET A	OBBRECOS	North Miami, FL 3316	1		
	•	· · · · · · · · · · · · · · · · · · ·		<u>-</u>	
	-				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BQX)	14050 NE 6th Avenue	, Suite 100		SET SET
·		North Miami, FL 3316	}		
	_		<del></del>		ES C
		_			10 St 10 T
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ol>			nter the name	of the	77.00
new registered agent and/or the new register		Corporate Services LL	C.		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·			123
	201 Alham	bra Circle, Suite 1205			
New Registered Office Address:		(Flor	ada street address)		
Nen Registered Office statutess.	- Coral Gabl	es		33134	Į.
		(City)	,	lorida (Zip Code)	
		(< 0))		11517 (1000)	
New Registered Agent's Signature, if changing I	Registered A	Agent:	la ablications	Atha nacitive	
hereby accept the appointment as registered agen	ni. 1 am jam	mar with and accept the	—	у те роѕшок	<i>t.</i>
_	Cir	WWW)	ed Agent, if ch	onaina	

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: $\underline{X}$ Change $\underline{X}$ Remove $\underline{X}$ Add	PT         John E           V         Mike J           SV         Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	David Shoshan	
Remove 2) Change Add	D	Simon Shoshan	
<ul><li>✓ Remove</li><li>3 ) Change</li><li>✓ Add</li><li> Remove</li></ul>	<u>P</u>	Elvis Dumervil	14050 NE 6th Avenue, Suite 100 North Miami, FL 33161
4) Change Add			
Remove 5/ Change Add	<del></del>	<del></del>	2074 HAY 21 SECRETALIAN
Remove 6) Change Add			27 SE STATE
Remove  F. If amending or add (attach additional she		ticles, enter change(s) here: (Be specific)	, err
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		36	
The date of each amendment(s) adoption:	<del></del>	, if other than t	he
date this document was signed.			
Effective date if applicable:  (no more than 90 days after amendment file date)			
(no more than 90 days after amendment file date)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is date will not b	e listed as the	
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 5/9/2024
	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)
	Elvis Dumervil
	(Typed or printed name of person signing)
	President
	(Title of person signing)