N 0500007974

(Re	equestor's Name)	
(Ad	ddress)	
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2018 MAY 21 AM II: 33 SECRETARY OF STATE

C. GOLDEN NAY 22 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	OON CONDOMINIUM ASSOCIATIO	N. INC.
DOCUMENT NUMBER: N05000007974		
The enclosed Articles of Amendment and fee	are submitted for filling.	
Please return all correspondence concerning	his matter to the following:	
Patrick Alayon, Esq.		
	(Name of Contact Person)	
Alayon and Associates, P.A.		
	(Firm/ Company)	, , , , , , , , , , , , , , , , , , ,
135 San Lorenzo Ave. Suite 820		
	(Address)	
Coral Gables, FL 33146		
	(City/ State and Zip Code)	
palayon@alayonlaw.com		
E-mail address: (t	be used for future annual report notifier	ntion)
For further information concerning this matte	, please call:	
Patrick Alayon, Esq.	305 at	216-4086
(Name of Contac		le) (Daytime Telephone Number)
Enclosed is a check for the following amount	made payable to the Florida Department	of State:
■ \$35 Filing Fee □\$43.75 Filin Certificate o	Status Certified Copy Co (Additional copy is cnclosed) CA	52.50 Filing Fee ertificate of Status ertified Copy additional Copy is nclosed)
<u>Mailing Address</u> Amendment Section	Street Addre Amendment S	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



May 9, 2018

PATRICK ALAYON, ESQUIRE 135 SAN LORENZO AVENUE SUITE 820 CORAL GABLES, FL 33146

SUBJECT: BLUE LAGOON CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N05000007974

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

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) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 118A00009619

Articles of Amendment Articles of Incorporation of

_									
(Name of Corporation as currently	filed	with	the	Flor	rida	Dept.	of St	ate

•			. ~/,
	Articl	es of Amendment	William 1
	Article	to s of Incorporation of	Dept. of State)
BLUE LAGOON CONDOMINIUM ASSOCIATI	ION, INC.		ASSE OF
	as currei	atly filed with the Florida	Dept. of State)
N05000007974 (Docum	nent Numb	per of Corporation (if knows	"O _A
		·	
Pursuant to the provisions of section 617,1006, Flor imendment(s) to its Articles of Incorporation:	nda Statut	es, this <i>Florida Not For Pro</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the	corporat	tion:	
			The nev
name must be distinguishable and contain the word		tion" or "incorporated" or	
'Company" or "Co." may not he used in the name			
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>	<u>ble:</u> DDRESS)	- -
2. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>)	<u>BOX</u>)	c/o Alayon and Associate	s, P,A.
		135 SAN LORENZO AV	E SUITE 820
		CORAL GABLES, FL 3	3146
N 16 P 41 T 4 P 4 P 4 P 4 P 4 P 4 P 4 P 4 P 4 P 4			al Est
 If amending the registered agent and/or registered agent and/or the new register. 			r the name of the
Name of New Registered Agent:	A&A RE	GISTERED AGENT, INC.	
	135 SAN	LORENZO AVENUE SU	TE 820
			and a stable and
New Registered Office Address:		(Florida	sneer aaaress)
<u>New Registered Office Address:</u>	Coral Ga		
<u>New Registered Office Address:</u>	Coral Ga		Florida 33146 (Zip Code)
		bles (City)	, Florida 33146
New Registered Office Address: Sew Registered Agent's Signature, if changing F hereby accept the appointment as registered agen		bles (City) Agent:	, Florida
New Registered Agent's Signature, if changing F		bles (City) Agent:	, Florida

Page 1 of 4

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Arti trach additional sheets, if necessary).	(Be specific)

The date of each amendment(s	adoption:	, if other than the
date this document was signed. O Effective date if applicable:	4/24/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will n Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.	
There are no members or m adopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
Dated	4/25/2018	
Cimputure	John Blefor	8
have not	hairman or vice chairman-of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
<u> </u>	sident of the Board of Directors of Blue Lagon Circleminia (Title of person signing)	m