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.

(((H19000355792 3)))



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 : CUEVAS, GARCIA & TORRES, P.A.

Account Number: I20030000123

Phone : (305)461-9500

Fax Number : (786)362-7127

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

	Address:			
LMOSI	AAAMACC:			
CHIGALA	AUGITESS.			

COR AMND/RESTATE/CORRECT OR O/D RESIGN LAS VISTAS AT DORAL CONDOMINIUM

ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

DEC 13 2019 I ALBRITTON 850-617-6381

12/11/2019 9:15:56 AM PAGE 1/001 Fax Server



December 11, 2019

FLORIDA DEPARTMENT OF STATE

LAS VISTAS AT DORAL CONDOMINIUM ASSOCIATION, INC. 8140 GENEVA CT DORAL, FL 33166

SUBJECT: LAS VISTAS AT DORAL CONDOMINIUM ASSOCIATION, INC.

REF: N05000009767

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H19000355792 Letter Number: 719A00025105

H190003557923

Articles of Amendment to Articles of Incorporation

of

e Florida Dept. of State)
nent Number of Corpora	tion (if known)
rida Statutes, this Florid	a Not For Profit Corporation adopts the following
e corporation:	
	The new prporated" or the abbreviation "Corp." or "Inc."
ble:	
(DDRESS)	
<i>BOX</i>)	· .
	-
	
	Florida, enter the name of the
Doral, FL 33166	
	(Florida street address)
	, Florida
(City)	(Zip Code)
Registered Agent:	
	d accept the obligations of the position.
	nent Number of Corporational rida Statutes, this Florida e corporation: I "corporation" or "income. I ble: IDDRESS) Stered office address in ed office address: 8140 Geneva Court Doral, FL 33166 (City) Registered Agent:

Page 1 of 4

H190003557923

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)

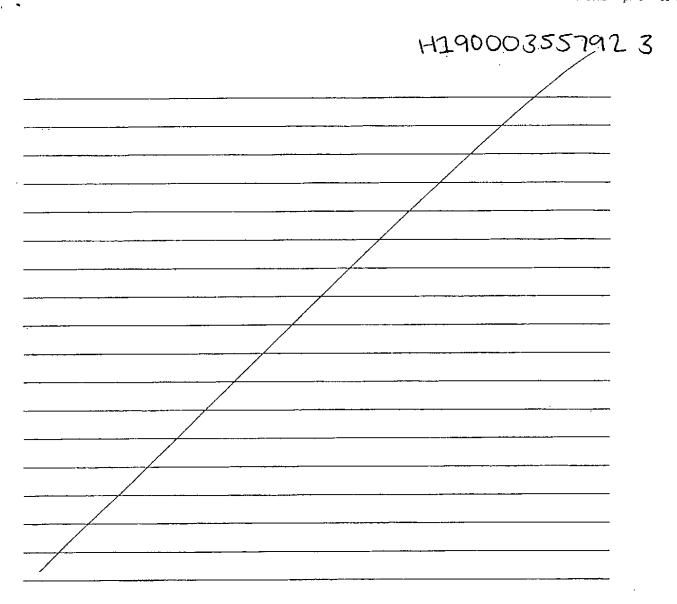
Please note the officer/director title by the first letter of the office title:

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	PT John Do V Mike Jo SV Sally Si	nes	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addrés</u> s
1) Change Add	<u>T</u>	Jorge Vernazza	
x Remove			
2) <u>×</u> Change Add	<u>P</u>	Nestor Velasquez	8140 Geneva Court Doral, FL 33166
Remove 3) Change x Add Remove	VP	Jorge Vernazza	8140 Geneva Court Doral, FL 33166
4) × Change Add	<u>T</u>	Sergio Stratta	8140 Geneva Court Doral, FL 33166
Remove			
5) × Change Add	<u>s</u>	Tiberio Faria	8140 Geneva Court Doral, FL 33166
Remove			
6) × Change Add	<u>D</u>	Hugo Escobar	8140 Geneva Court Doral, FL 33166
Remove E. If amending or addit (attach additional sheet)	ng additional Arti	Page 2 of 4 (cles, enter change(s) here: (Be specific)	
N/A			
·	,		
	_/		
/			

41 ann 255 700



Page 3 of 4

The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this d document's effective date on the Department of State's records.	ate will not be 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.

H190003557923

H190003557923

ad		oard of directors.
	Datêd	12/11/2019
	Signatur	(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)

SECRETAL.)

Page 4 of 4

(Title of person signing)