

10/15/21, 11:33 AM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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(((H21000385137 3)))



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To:

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

From:

Account Name : CUEVAS, GARCIA & TORRES, P.A.
Account Number : 120030000123
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.****

Email Address: ACCOUNTING@CUEVASLAW.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN
LAS VISTAS AT DORAL CONDOMINIUM ASSOCIATION, INC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment
to
Articles of Incorporation
of

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LAS VISTAS AT DORAL CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N05000009767

(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: _____

(Florida street address)

New Registered Office Address:

_____, Florida
(City) (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

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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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	V	PINZON, LILIANA	8140 GENEVA CT DORAL, FL 33166
2) ___ Change ___ Add	T	ESCOBAR, HUGO	8140 GENEVA CT DORAL, FL 33166
3) <input checked="" type="checkbox"/> Remove ___ Change ___ Add <input checked="" type="checkbox"/> Remove	S	FARIA, TIBERIO	8140 GENEVA CT DORAL, FL 33166
4) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	S	VERNAZZA, JORGE	8140 GENEVA CT DORAL, FL 33166
5) ___ Change <input checked="" type="checkbox"/> Add ___ Remove	T	Villamizar de Odisho, Liz	8140 GENEVA CT DORAL, FL 33166
6) ___ Change <input checked="" type="checkbox"/> Add ___ Remove	D	FERRANDO, MIGUEL	8140 GENEVA CT DORAL, FL 33166

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

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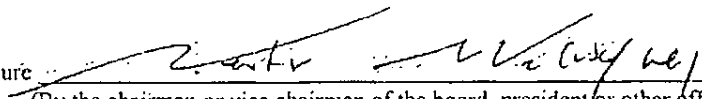
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☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval

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- ☒ 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 October 14, 2021

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)

Nestor Velasquez

(Typed or printed name of person signing)

President

(Title of person signing)

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SECRET
FALL 2021