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.

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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.\*\*

Email:	Address:			
Emall	Address:			

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

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

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Help

## H230003699933

Articles of Amendment to Articles of Incorporation of

LAS VISTAS AT DORAL CONDOMINIUM ASSO		
Name of Corporation as currently filed with the F	orida Dept. of State)	
N05000009767		
(Document	Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	_
ame must be distinguishable and contain the word "c Company" or "Co." may not be used in the name.	corporation" or "incorporated	
3. Enter new principal office address, if applicable		
Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u> )	•
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, office address:	enter the name of the
Name of New Registered Agent:		
_	(Fla	vida street address)
New Registered Office Address:		
		, Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept i	the obligations of the position.
	Signature of New Registe	red Jant if changing

H23000369993 3

## H23000369993 3

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>Doc</u> <u>Jones</u> Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add	VP	PINZON, LILIANA	8140 GENEVA CT DORAL, FL 33166	5053.00
Remove  2)    Change     Add	<u>v</u>	VILLAMIZAR DE ODISHO, LIZ	8140 GENEVA CT DORAL, FL 33166	1 1
Remove 3)	<u>D</u>	VERNAZZA, JORGE	8140 GENEVA CT	
4) Change Add	TS	FARIA, TIBERIO	B140 GENEVA CT DORAL, FL 33166	
Remove 5) Change Add				
Remove 6) Change Add				
Remove  E. If amending or additional sh	ding additional A neets, if necessary,	rticles, enter change(s) here: ). (Be specific)		

H23000369993 3

was/were sufficient for approval.

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	Ostalow 18, 2023	
The date of each amendment(s) add date this document was signed.	option: October 18, 2023	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date wartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad-	opted by the members and the number of votes cast for the amendment	<u>s</u> )

H23000369993 3

H23000369993 3

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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)

Tiberio Fariz

(Typed or printed name of person signing)

Las Vistas at Doral

8140 Geneva Court, Doral 33166

(Title of person signing)

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