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JUN 2 6 2012 T. ROBERTS

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Cambridge House Balamining.
DOCUMENT NUMBER: 105000 1037
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sia Herav.
(Name of Contact Person)
(Firm/ Company)
1822 No21 28 21
Hialeah (Address)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sia Heravi at (305) 992-6745
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & \$243.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Mailing Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32314  Z661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment
to Articles of Incorporation
Cambrilge House Continum Association Two
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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:
New Registered Office Address:  (Florida street 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.

Page 1 of 4

Signature of New Registered Agent, if changing

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: XChange	PT John Doe		
X Remove	V Mike Jones		
X Add	SV Sally Smith		
Type of Action (Check One)	<u>Title</u> <u>Name</u>		Address
Change Add Remove	V Mice	eya Traga	1875 W 565 #312 Hiateh FT 33012
2) Change Add Remove	V Juan	Alberto Mauri	1815 W 565 # 415 Hickah Fr 33012
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		<del></del>	

f amending or adding addi uttach additional sheets, if ne	cessary). (E	Be specific)	<u> </u>		
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The date of each amendment(s) adoption:
Effective date if applicable: 6/25/20/2  (no more than 90 days after amendment file date)
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  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)
Mehrolad Heravi
(Typed or printed name of person signing)
(Title of person signing)