## N05000 010 760

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nar	me)
(Доси	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ling Officer:	

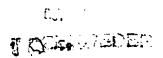
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Cobblestone NAME OF CORPORATION:	at Pembroke Homeowners' Association, Inc.
N05000010760	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Maria T. Hernandez, LCAM	
	(Name of Contact Person)
Cobblestone at Pembroke Homeowners' Associ	ciation, Inc.
	(Firm/ Company)
14701 SW 10th Street	
	(Address)
Pembroke Pines, FL 33027	
	(City/ State and Zip Code)
mhernandez@miamimanagement.com	
E-mail address: (to)	be used for future annual report notification)
For further information concerning this matter.	please call:
Maria T. Hernandez	954 450-5714 at
(Name of Contact	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following annount n	nade payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of \$	Fee & S43.75 Filing Fee & S52.50 Filing Fee  Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1. 32301

## Articles of Amendment to Articles of Incorporation

Of

Cobblestone at Pembroke Homeowners' Association, Inc.

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

N05000010760

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation

(Document Nur	mber of Corporation	(if known)	<del></del>	
Pursuant to the provisions of section 617.1006. Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida No</i>	ot For Profit Corporatio	n adopts th	e following
A. If amending name, enter the new name of the corpor	ation:			
N/A				771
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpo	rated" or the abbreviati	on "Corp."	The new ' or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	N/A			
		<del> </del>		
				<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<del></del>		
			<b>-</b>	
				<u>ا</u> 0 و
D. If amending the registered agent and/or registered of		ida, enter the name of	the	
new registered agent and/or the new registered office	e address:			17
Name of New Registered Agent:		-		
			ئا ئا د—، سور ور 	<u>က</u> က
New Registered Office Address:		(Florida street address)	à P	ဘ
		. Flor	ida	
	(City)	(Z.	ip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		cept the obligations of th	ie position.	
	Simultana of M B	egistered Agent, if chang		

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	$\underline{V}$ $\underline{Mi}$	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	T	Cesar Marmanillo	14701 SW 10th Street
Add			Pembroke Pines. FL 33027
Remove			
2) Change	<u>.                                     </u>	Vanessa Christina Caycedo	14701 SW 10th Street
Add			Pembroke Pines, FL <sub>3</sub> 33027
X Remove			7.55
3 ) Change			
Add			
Remove			5 S
4) Change			
Add			
Remove			
5) Change			_
, Add			
Remove			
6) Change			_
Add			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
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	-
	-
<del></del>	
	<b>»</b> .,,
	0 61
	-2 January

			September 10, 2019	
	e date of each ame: e this document was		otion:	, if other than the
Eff	ective date <u>if appli</u>	Septen able:	nber 10. 2019	
			(no more than 90 days after amendment file date)	
<u>No</u>	te: If the date inser- nument's effective d	ed in this block te on the Depar	does not meet the applicable statutory filing requirements, this date timent of State's records.	will not be listed as the
Ad	option of Amendm	nt(s)	( <u>CHECK ONE</u> )	
	The amendment(s was/were sufficier	was/were ador t for approval.	sted by the members and the number of votes cast for the amendment	(s)
	There are no mem adopted by the bo		s entitled to vote on the amendment(s). The amendment(s) was/were	:
	Dated	9/10/19		
	Signature	By the chairins	in or vice chairman of the board, president or other officer-if director	
		have not been	selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
			CEDAR P. MARMANILLO	-
			(Typed or printed name of person signing)	
			TREASURER	<del>2</del> 00
			(Title of person signing)	) 1000 1000
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