

N05000011199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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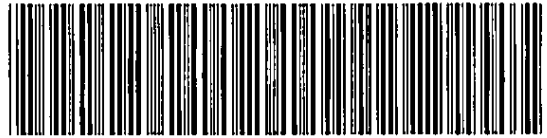
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 DEC 18 PM 2:48

Amend

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: The Falls of Portofino Master HOA, Inc.

DOCUMENT NUMBER: N05000011199

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gloria Morcinsten, CHM  
(Name of Contact Person)

c/o PMG Asset Services  
(Firm/ Company)

4651 Sheridan Street Suite 480  
(Address)

Hollywood, FL 33021  
(City/ State and Zip Code)

gloriam@primegroupus.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gloria Morcinsten at 954-624-4731  
(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:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 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

Street Address  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 7, 2017

GLORIA MORENSTEIN, CAM  
C/O PMG ASSET SERVICES  
4651 SHERIDAN STREET, SUITE 480  
HOLLYWOOD, FL 33021

SUBJECT: THE FALLS OF PORTOFINO MASTER HOA, INC.  
Ref. Number: N05000011199

We have received your document for THE FALLS OF PORTOFINO MASTER HOA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Diane Cushing  
Senior Section Administrator

Letter Number: 317A00024728

RECEIVED  
17 DEC 18 AM 11:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

The Falls of Portofino Master HOA, Inc.

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

N05000011199

(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:

N/A 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)

N/A

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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: N/A

(Florida street address)

New Registered Office Address:

(City)

Florida

(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.

N/A

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

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>D</u>	<u>James Dupre</u>	<u>4651 Sheridan ST.</u>
<input checked="" type="checkbox"/> Add			<u>Suite 480</u>
<input type="checkbox"/> Remove			<u>Hollywood, FL 33021</u>
2) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
3) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
4) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
5) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>
6) <input type="checkbox"/> Change	<u>          </u>	<u>                                  </u>	<u>                                  </u>
<input type="checkbox"/> Add			<u>                                  </u>
<input type="checkbox"/> Remove			<u>                                  </u>

E. If amending or adding additional Articles, enter change(s) here:

*(attach additional sheets, if necessary). (Be specific)*

N/A

The date of each amendment(s) adoption: September 19, 2017, if other than the date this document was signed.

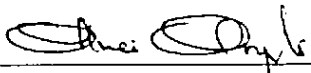
Effective date if applicable: N/A  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 11/22/17

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)

Alicia Angulo  
(Typed or printed name of person signing)

Vice President / Treasurer  
(Title of person signing)



September 19, 2017

The meeting of the Board of Directors of The Falls of Portofino Master HOA, Inc. was called to order at 4:00 PM.

Attendance:

Nancy Iglesias, by phone

Alicia Angulo, by phone

James Dupre, by phone

Gloria Morenstein, CAM, at Clubhouse 7047 Ambrosia Lane, Naples, Florida.

A quorum of the Directors was established. An opening for an additional director was brought up by the CAM, and a call for nominations was opened. Nancy Iglesias nominated James Dupre. Alicia Angulo seconded the motion. Hearing no objections or other nominations, a vote was called. James Dupre was unanimously elected to the Board of Directors.

Gloria Morenstein asked if there was any old or new business to be discussed. Hearing no other business, Nancy Iglesias moved to adjourn the meeting, Alicia Angulo seconded the motion. The meeting was adjourned at 4:15 PM.

Respectfully submitted,

Gloria Morenstein, CAM.