N05000011306

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600306184116

12/05/17--01029--022 *+35.00

17 DEC 18 PM 2: 48

Sund

JAN 3 2018 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Fells of Portofine Condominium Mr. 4 Assert	20, Inc.
DOCUMENT NUMBER: NO 50000 11206	_
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Gloria Morenstein CAM (Name of Contact Person)	
PMG Asset Services (Firm/Company)	_
4651 Sheridan St. Suite 480 (Address)	_
Hollywood FL. 33021 (City/ State and Zip Code)	_
(J2-mail address: (to be used for future annual report notification)	- <u>e:</u>
For further information concerning this matter, please call:	VISION N
For further information concerning this matter, please call: Gloria Morensiein at 954 - 624 - 4731 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	A CARE
Enclosed is a check for the following amount made payable to the Florida Department of State:	OF STATE
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)	ATE ATTOMS

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314

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



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 CONDOMINIUM NO. 4

ASSOCIATION, INC.

Ref. Number: N05000011206

We have received your document for THE FALLS OF PORTOFINO CONDOMINIUM NO. 4 ASSOCIATION, 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

17 EEC 18 AK III:

Letter Number: 917A00024728

Articles of Amendment 10 40 Articles of Incorporation

	01	1 J	. 0	,		
The Falls of Portofino Conc	dom, Aik	<u>∽ </u>	, 4 //55 o Florida De	<u>ocuation (Li</u> nu of State)	<u> </u>	
				pr. or chare		
(Document N)50000	11206	. GCknown)			
(Document P	Number of Co	orporation	i (ii kilowii)			
fursuant to the provisions of section 617.1006, Florida S mendment(s) to its Articles of Incorporation:	tatutes, this	Torida N	'ot For Profi	<i>t Corporation</i> ad	opts the following	
. If amending name, enter the new name of the corp	ooration:					
AIN					The new	
<u>N γλ</u> ame must be distinguishable and contain the word "cor <u>Company" or "Co." may not be used in the name</u> .	poration" o	· "incorpe	orated" or th	e abbreviation "	Corp." or "Inc."	
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	<u>1823</u>)					
		·	**			
	*****				·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	الم	/ }				
[33.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	, 4					
						- .
						₹.,
. If amending the registered agent and/or registered	l office addr	ess in Flo	orida, enter	the name of the	70	
new registered agent and/or the new registered of					23	12:7 ⊝:
Name of New Registered Agent:	AlA					777
	<u> </u>				P A	- (S)
			(Florida str	eet address)	2: 4	03
New Registered Office Address:					<u>.</u>	4
				, Florida		. ž
	(Cit)		(Zip C	ođe)	
ew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I d	tered Agent: am familiar v	vith and a	accept the ob	ligations of the p	osition.	
	NIA					
	Signatur	e of New i	Registered A	gent, 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 X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		James Dupre	Snite 480 Hollywood, FL 33001
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

4	ing additional . cets, if necessar				-		•	
N	A							
		·				-		
					_	<u></u>		
				 -		•		
			. .					
				·-·				
						<u> </u>		
								
· · · · · · · · · · · · · · · · · · ·								
			-					
		· · · · · · · · · · · · · · · · · · ·	·	 -				
		<u>.</u>				.		
								
-					<u> </u>		-	
	· · · · · · · · · · · · · · · · · · ·							
	 .							
								

The date of each amendment(s) adoption: late this document was signed.	September	19,2017	, if other than the
Effective date if applicable: H M	nore than 90 days aft	er amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of		statutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s) (CH	BECK ONE)		
The amendment(s) was/were adopted by th was/were sufficient for approval.	ne members and the m	umber of votes east for the	amendment(s)
There are no members or members entitled adopted by the board of directors.	I to vote on the amend	dment(s). The amendment(s) was/were
Dated			
Signature	· cent		(6.1)
	by an incorporator -	rd, president or other office if in the hands of a receive iary)	
Alici	a Argulo (Typed or printed	name of person signing)	
Vice-pe	egdent / Tr	of person signing)	



September 19, 2017

The meeting of the Board of Directors of The Falls of Portofino Condo 4, 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.