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.

(((H23000283597 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

_	
٦	 ٠

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FRANK, WEINBERG, BLACK, P.L.

Account Number : I2004000083

: (954)474-8000 Phone Fax Number : (954)474-9850

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:						
-------	----------	--	--	--	--	--	--

COR AMND/RESTATE/CORRECT OR O/D RESIGN NURIVER LANDING CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Articles of Amendment to Articles of Incorporation of

NuRiver Landi	ng Condominium Associatio	on, Inc.
(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
	06000001525	
(Document N	lumber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corr	poration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	rporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(<u>223)</u>	
C. Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:	d office address in Florida. filce address:	enter the name of the
CHIEF OF THE APPENDING THE COMMENT		
	(Fi	orlda street address)
New Registered Office Address:		
	_	, Florida
	(City)	(Zip Code)
New Resistared Agent's Signature, if changing Regis	tared Agent:	
I hereby accept the appointment as registered agent. I	on familiar with and accept	the obligations of the position.
,	•	
-	Signature of New Regist	ered Agent, if changing
—— 		

H23000283597 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 Janes 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		Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address -
1) Change Add		Shannon Brown	511 SE 5th Avenue Ft. Landerdale, FL 33301
Remove 2) Change Add	VP/T	Anthony Accordino	511 SE 5th Avenue Ft. Lauderdate, FL 33301
Remove 3) Change Add Remove	<u>T</u>	Anthony According	511 SE 5th Avenue Ft. Lauderdale, FL 33301
4) Change Add	Officer	Orestes Melgarojo	511 SE 5th Avenue Ft. Lauderdale, FL 33301
Remove 5) Change Add	<u>VP D</u>	Orestos Melgarejo	511 SE 5th Avenue Ft. Lauderdale, FL 33301
Remove 6) Change x Add	S D	Lauru Hernandez	511 SE 5th Avenue Ft, Lauderdale, FL 33301
Ramove E. If amending or a (attach additional	dding additional sheets, if necessar)	Articles, enter change(s) here: v). (Be specific)	

	i	
		
•		
·		
		· · ·
	· · · · · · · · · · · · · · · · · · ·	
The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file d	
Note: If the date inserted in this block of document's effective date on the Depart	loes not meet the applicable statutory filing requ ment of State's records.	tirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cas	t for the amendment(s)

H23000283597 3

There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	Aug 9, 2023
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)
	Lisa Echemi
	(Typed or printed name of person signing)
	President
	(Title of person signing)