N06000004222

(Re	questor's Name)	
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JUL 20 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SAN MICHELE	CONE	DOMINIUM ASS	OCIATION, INC.
DOCUMENT NUM	BER: N06000004222			
The enclosed Articles	of Amendment and fee are subn	itted for	filing.	
Please return all corres	spondence concerning this matte	r to the fo	ollowing:	
		i Rosen		
	(Name of C	Contact Pe	erson)	
નું	El-Ad Nationa	al Prope	rties LLC	
	(Firm/	Company	')	
	1301 Internationa	ıl Parkw	ay Suite 200	
	(Ac	idress)		
	Sunrise	. FL 333	323	
	(City/ State	·		· · ·
For further information	rrosen@ela E-mail address: (to be used n.concerning this matter, please	for future		tion)
Rami Rosen		at (954) 846-7800)
(Name o	of Contact Person)		(Area Code & Daytim	e Telephone Number)
Enclosed is a check for	r the following amount made pa	able to th	ne Florida Department	of State:
\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	Certific	.75 Filing Fee & ed Copy ional copy is ed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 essee, FL 32314		Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to **Articles of Incorporation** of

SAI	MICHELE CONDOMINIUM ASSOCIATION, INC.	
(Na	ne of Corporation as currently filed with the Florida Dept. of State)	
	N06000004222	
	(Document Number of Corporation (if known)	
•	isions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts lment(s) to its Articles of Incorporation:	
A. If amending na	me, 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 prin	cipal office address, if applicable:	
(Principal office ad	dress 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)	(Zin Coda)

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.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	Joseph Manpr	1301 INTERNATIONAL PKWY; STE 200 SUNRISE FL 33323	☐ Add ☑ Remove
TD	Bronfman Arik	1301 INTERNATIONAL PKWY:	j □ Add ☑ Remove
<u>VSD</u>	Rami ROsen	1301 INTERNATIONAL PKWY	☐ Add ☑ Remove
E. <u>If ame</u> (attach	nding or adding additional Artical additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
			
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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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	Rami Rosen	1301 INTERNATIONAL PKWY; STE 200 SUNRISE FL 33323	✓ Add ☐ Remove
TD	Lior Carucci	433 Plaza Real #275 Boca Raton FL 33432	✓ Add ☐ Remove
SD	Valerie Slezak	433 Plaza Real #275 Boca Raton FL 33432	✓ Add ☐ Remove
	ng or adding additional Articles, enter c itional sheets, if necessary). (Be specific		
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	•		
			···

The date of each amendment(s)	adoption: 7/14/2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	
·	(no more than 90 days after amendment file date)
, in the second of the second	
	(CVIII CV CNIII)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were awas/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mem	abers entitled to vote on the amendment(s). The amendment(s) was/were
adopted by the board of directo	ors.
.	// //
Dated	7/14/2011/
Signature	roll
	chairman or vice chairman of the board, president or other officer-if directors
	of been selected, by an incorporator – if in the hands of a receiver, trustee, of our tappointed fiduciary by that fiduciary)
	Rami Rosen
	(Typed or printed name of person signing)
inger .	VSD
	(Title of person signing)

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