NDWW5490

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05/06/14--01015--021 **35.00



Amend 105.16.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Willas San	Miguel Condo	ominium Association, Inc.
DOCUMENT NUMBER: NO600005	5490	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Angelica Young, Esq.		
<u> </u>	(Name of Contact Pe	rson)
	(Firm/ Company)
5901 SW 74 Street, # 36	00	
	(Address)	
Miami, Florida 33143		
	(City/ State and Zip (Code)
angie@angieslav	v.com	
E-mail address: (to be use	d for future annual rep	ort notification)
For further information concerning this matter, please	e call:	
Angelica Young	_{*,} 305	, 663-1234
(Name of Contact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida D	pepartment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clif	eet Address endment Section ision of Corporations from Building 1 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

Villas of San Miguel Condominium Association, Inc .

•	Articles	s of Amendment		
	Articles	to of Incorporation		16 May 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Villas of San Miguel Cor	ndominium A	of ssociation Inc.		May William
(Name of Corporation as current				- B
	N060000	· · · · · · · · · · · · · · · · · · ·		Co Take
(Doc	ument Number of Cor			- 🖖
Pursuant to the provisions of section 617.3 amendment(s) to its Articles of Incorporat	•	s, this <i>Florida Not For Profit</i> (Corporation adopts the	e following
A. If amending name, enter the new na	me of the corporation	<u>on:</u>		
				The new
name must be distinguishable and contain "Company" or "Co." may not be used in		on" or "incorporated" or the	abbreviation "Corp."	or "Inc."
B. Enter new principal office address, i (Principal office address MUST BE A ST			·	_
	,			-
		······································		<u></u>
C. Enter new mailing address, if applic	cable:			
(Mailing address MAY BE A POST (-
				_
D. If amending the registered agent and new registered agent and/or the new			e name of the	
Name of New Registered Agent:		YOUNG, ESQ.		
Charles of 1100 Toolson our 12018.	5901 SW 74	1 STREET, # 300	 -	,
N. D 100		Florida street address)		
New Registered Office Address:	MIAMI		221/12	
	(City)	, Fl	orida 33143 (Zip Code	
			(ZIP Code	<i>)</i>
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			rations of the position.	
,	Enodeia	Jome	J 14	
	Signature of New R	egistered/Agent, if changing		

Page 1 of 4

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 <math>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	<u>V</u> <u>Mil</u>	n Doe ce Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Ţ	Abel Amador	P.O. Box 402278
X Add			Miami Beach, FI
Remove			33140
2) Change	S	Faniela Navas	399 NW 72 Avenue
X Add			321
Remove			Miami, Florida 33126
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		D • • • •	

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)			
			 <u> </u>	
			 	
The second se	· · · · · · · · · · · · · · · · · · ·		 	
		<u>, , , , , , , , , , , , , , , , , , , </u>	 	
			 	
			 	

	date of each amendment(s) adoption: 4-28-14	, if other than the
date	e this document was signed.	
Eff	ective date <u>if applicable</u> :	_
	(no more than 90 days after amendment file date)	
Ado	option 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 4-28-14	
	Signature Lusersial Mestre	
	(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)	
	Ms. Rusiraida Mestres	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	