

NO6000007869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

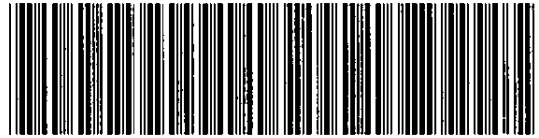
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CLERK OF STATE
TALLAHASSEE, FLORIDA

*Amend
Thurs
8-11-09*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VILLA RUSTICA I CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N06000007869

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

Please return all correspondence concerning this matter to the following:

MARCOS VIEIRA
Name of Contact Person

VILLA RUSTICA I CONDOMINIUM ASSOCIATION, INC
Firm/ Company

18802 NW 57 AVE, MIAMI, FL - 33015
Address

MIAMI, FL - 33015
City/ State and Zip Code

VRUSTICA1@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCOS VIEIRA at (786) 554-6350
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

COVER LETTER

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Division of Corporations

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2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2009

MARCOS VIEIRA
VILLA RUSTICA I CONDOMINIUM ASSOCIATION
18802 NW 57TH AVENUE
MIAMI, FL 33015

SUBJECT: VILLA RUSTICA I CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N06000007869

We have received your document for VILLA RUSTICA I CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 309A00026349

RECEIVED
2009 AUG 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Villa Rustica I Condominium Association, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO6000007869

(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:

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)

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)

(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.

Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA
STATE DEPT. OF REVENUE

(Attach additional sheets, if necessary)

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

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

[illegible]

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DV	JUMP, KENNETH	18890 NW 57TH AVENUE #102 MIAMI FL 33015	X ADD
D	BROCHERO, HAUDREY	18820 NW 57 TH AVENUE # 202 MIAMI, FL 33015	X DELETE
DST	BROCHERO, HAUDREY	18820 NW 57 TH AVENUE # 202 MIAMI, FL 33015	X ADD
D	CRUZ, LUIS	18830 NW 57 TH AVENUE # 103 MIAMI, FL 33015	X ADD

The date of each amendment(s) adoption: 04/02/2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 05/29/2009

Signature [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)

Ricardo Milian - President
(Typed or printed name of person signing)

President
(Title of person signing)