## NO6 000009435

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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<b>9</b>





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OCT 28 2019



October 8, 2019

JUAN A SANCHEZ 10251 SW 72 ST MIAMI, FL 33173

SUBJECT: WEST SILVER CREST CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N06000009435

We have received your document for WEST SILVER CREST CONDOMINIUM 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):

The form you submitted is for a PROFIT CORPORATION, but your entity is a NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

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) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 419A00020646

36 120 8107

## 

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WEST SILVER C	REST CONDOMINIUM A	SSOCIATION, INC.	
DOCUMENT NUME	N06000009435			
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	JUAN A. SANCHEZ			
		Name of Contact Person	n	
	JUAN A. SANCHEZ, P.A.			
	-	Firm/ Company		
	10251 SW 72 STREET			
		Address		
	MIAMI, FL 33173			
		City/ State and Zip Cod	e	
HIAN	@JUANSANCHEZPA.CON			
JOAN	-	sed for future annual report	notitication)	
	13-man address, (to be di	sed for future annual report	notificationy	
For further information	concerning this matter, pleas	se call:		
JUAN A. SANCHEZ		at (	275-8550	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$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

## Articles of Amendment to Articles of Incorporation of

WEST SILVER CREST CONDOMINIUM ASSOCIATION, INC.

WEST SIEVER CREST CONDOMINIUM ASSO			
N0600009435	i as curren	tly filed with the Florida Dept. of State)	
	nent Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For Profit Corporation a	dopts the following
A. If amending name, enter the new name of th	e corporat	ion:	
name must be distinguishable and contain the wore "Company" or "Co." may not be used in the nam		tion" or "incorporated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applica	ıble:	10605 SW 87 AVE.	
(Principal office address MUST BE A STREET A		MIAMI, FL 33156	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	ROX)	10605 SW 87 AVE.	
(Stuting dualess <u>MAY DO STAGET OF FIGE</u>	<u>15070</u> )	MIAMI. FL 33156	NLL NLL
			128
D. If amending the registered agent and/or reginew registered agent and/or the new register			
	-	SANCHEZ, P.A.	); 0:0
<u>Name of New Registered Agent</u> :	10251 SV	V 72 STREET, #106	
New Registered Office Address	:	(Florida street address)	
	МІАМІ	, Florida	33173
	-		Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered 11. – Lum fa	Agent: miliar with and accept the obligations of the	position.
-	.5	lignature of New Registered Agent, if changin	Įģ.

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 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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P.S.D	PILAR MORENO-MIYAR	11837 SW 93 TERRACE
Add			MIAMI, FL 33186
X Remove			
2) Change	P	FERNANDO BORI	10251 SW 72 STREET. #106
X Add			MIAMI, FL 33173
Remove			
3 ) Change	T. D	RAMON MIYAR JR.	14024 SW 47 TERRACE
Add			MIAMI, FL 33175
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sh	ing additional Arti eets, if necessary).	(Be specific)			
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			<del></del>	 	

The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partinent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)	
There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated	10/8/19	
Signature	The Now Ofice	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	Pilar Morens - MiyAR	
	(Typed or printed name of person signing)	
_	HANAGER	
	(Title of person signing)	