N06000010706

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special menancian to running emission.				





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C.COULLIETTE

JAN 04 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CO	ORPORA	TION: The 20	Cond	MINIUM	Associa	Fon, Inc
DOCUMENT	NUMBE	R: 1060000	1070	6		
The enclosed A	rticles of	Amendment and fee are	submitted	for filing.		
Please return al	l correspo	ondence concerning this r	matter to tl	ne following:		
		ANTONIO	SiLVA e of Contac	et Person)		
	The	20 Concomin	IUM A	Sociation (Sociation)	~,Inc	····
	90. B	0× 800 404.	MIAMI (Address	Fbeida (*)	<i>3328</i> 0	
		MIAMI, FC	332	80		
-		MRL830@ Aol E-mail address: (to be	L. COA	ture annual re	port notification	on)
For further info	rmation c	oncerning this matter, ple	ease call:			
Auto	Name of (SiLVA Contact Person)	at	786 (Area Co	356 - 1 de & Daytime	415 Telephone Number)
		ne following amount mad	de payable	to the Florida	Department of	State:
\$35 Filing Fe	ee [☐\$43.75 Filing Fee & Certificate of Status	Ce: (Ac	\$43.75 Filing rtified Copy dditional copy closed)		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
		ent Section of Corporations			ent Section of Corporations	,

2661 Executive Center Circle Tallahassee, FL 32301



December 16, 2010

ANTONIO SILVA THE 20 CONDOMINIUM ASSOCIATION, INC. PO BOX 800 404 MIAMI, FL 33280

SUBJECT: THE 20 CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N06000010706

We have received your document for THE 20 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 designation of the registered agent must be at a Florida street address.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 910A00029160



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Articles of Amendment

Articles of Incorporation

THE 20 Concominion Association, Inc (Name of Corporation as currently filed with the Florida Dept. of State) 20FO1000000N (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 nar	<u>ne, enter the</u>	new name of	the corporation:
----	-----------------	----------------------	-------------	------------------

SAME

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)

MIAMI BEACH FL 33141

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) P.O. Box 600-404 MIAMI, FL 33280

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:

(Florida street address)

New Registered Office Address:

(Florida street auth Co.),
MIAMI Beach, Florida 33.141
(Zip Code) 33141

ټ.

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.

ignature of New Registered Agent, if changing

Page 1 of 3

removed and	the Officers and/or Directors, ento title, name, and address of each (onal sheets, if necessary)	er the title and name of each officer Officer and/or Director being added	<u>/director being</u> <u> :</u>
Title	Name	Address	Type of Actio
PRESIDENT	ANTONIO SILVA Luis VEGAT	20.8.8 HORE DY #1 MIAMI BEACH TV 3314 DAVID LIFSHULTZ	Add Remove
ice <u>Presid</u> ont	Luis VEGAT	9313 nw 121 8 HIALEAH FL 330-18 DAVID UFSHUUZ	Add Remove
	itional sheets, if necessary). (Be s	specific)	
	•		
			<u>-</u>

The date of each amendment(s) adoption: 12-10-10
(date of adoption is required) Effective date if applicable: 12-8-10
(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.
Signature (By the chairman of 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, of other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President (Title of person signing)

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