

NEW 000011399

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CAPITOL SERVICES, INC.
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2019 SEP 26 PM 12:09

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MIRAMAR TOWN CENTER MASTER ASSOCIATION, INC.**

PLEASE PROVIDE THE ORIGINAL SUBMISSION DATE OF 9/24/2019

Certificate of Status	0
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September 25, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MIRAMAR TOWN CENTER MASTER ASSOCIATION, INC.

***PLEASE PROVIDE THE ORIGINAL
SUBMISSION DATE OF 9/24/2019***

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

This is a Non-profit corporation the document you sent in is for a Profit corporation.

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.

Tracy L. Lemieux
Regulatory Specialist II

FAX Aud. #: H19000285863
Letter Number: 919A00019876

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2019 SEP 24 AM 10:29

Articles of Amendment
to
Articles of Incorporation
of

Miramar Town Center Master Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N06000011399

(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.)

696 NE 125 Street

North Miami, FL 33161

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

696 NE 125 Street

North Miami, FL 33161

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:

(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

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:

☒ Change

PT

John Doe

☒ Remove

V

Mike Jones

☒ Add

SV

Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

Petricola, John L

1111 Brickell Avenue

☐ Add

Suite 1100

☒ Remove

Miami, FL 33131

2) ☐ Change

D

Petricole, John L

1111 Brickell Avenue

☐ Add

Suite 1100

☒ Remove

Miami, FL 33131

3) ☐ Change

D

Puma, Paul

1111 Brickell Avenue

☐ Add

Suite 1100

☒ Remove

Miami, FL 33131

4) ☐ Change

VP

Puma, Paul

1111 Brickell Avenue

☐ Add

Suite 1100

☒ Remove

Miami, FL 33131

5) ☐ Change

D

Izhak, Yoram

696 NE 125 Street

☒ Add

North Miami, FL 33161

☐ Remove

6) ☐ Change

☐ Add

☐ Remove

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

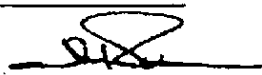
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 September 25, 2019


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)

John L. Petricola

(Typed or printed name of person signing)

Director

(Title of person signing)