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COVER LETTER

TO: Amendment Section Division of Corporations

PARADISE VILLAS E	STATES CONDO	MINIUM ASS	OCIATION, INC.
N06764			SOCIATION, INC.
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitt	ted for filing.		2
Please return all correspondence concerning this matter to	o the following:		•
	Carmen M. Peters	s, CPA	
4)	lame of Contact Pe	erson)	
Fernal	ndez-Bergnes & A	ssociates, P.A.	
	(Firm/ Company	•)	
	7400 West Flagler	Street	
	(Address)		
	Miami, FL 331-	1-1	
(C	City/ State and Zip (Code)	
	epeters@affbepa.	com	
E-mail address: (to be used for	or future annual rep	ort notification)
For further information concerning this matter, please ca	d1:		
Carmen M. Peters, CPA	at	305	648-7100
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made paya	ible to the Florida I	Department of	State:
■ \$35 Filing Pee □\$43.75 Filing Fee & □ Certificate of Status	1843.75 Filling Fee Certified Copy (Additional copy i enclosed)	Certif is Certif (Addi	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Ar Di Cl 26	reet Address nendment Sect vision of Corp ifton Building 61 Executive C illahassee, FL 3	orations Center Circle

Articles of Amendment to Articles of Incorporation

of

PARADISE VILLAS ESTATES CONDOMINIUM ASSOCIATION, INC.

PARADISE VILLAS ESTAT			
(Name of Corporation as current	tly filed with the Florida Do	ept, of State)	
	N06764		
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Prof</i>	it Corporation adopts the following	
A. If amending name, enter the new name of the corporati	on:		
N/A	<u></u>	The new	
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or t	he abbreviation "Corp." or "Inc "	
	7400 West Flagler Street		
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	(i) Miami, FL 33144		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7400 West Flagler Street		
initing marrow interest in the second	Miami, FL 33144		
D. If amending the registered agent and/or registered office	ce address in Florida, enter	the name of the	
new registered agent and/or the new registered office a	ddress:		
Name of New Registered Agent:			
,	(Florida's	treet address)	
New Registered Office Address:			
N/A		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the or	bligations of the position.	
	Signature of New Registered .	Lazar if changing	
.,	agnature oj New Kegisterea .	адет, у спануту	

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	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	SD	Dora Y. Porro	100 SW 110 Avenue, #138
Add			Miami, FL 33174
X Remove			
2) Change	PD	Luis Roman	100 SW 110 Avenue, #139
Add			Miami, FL 33174
X Remove	CJ4	Raul Blanco	100 SW 110 Avenue, #124 Miami, FL 33174
X Add			
	r	Maria Lourdes Santos	100 SW 110 Avenue, #105
4) Change X Add			Miami, FL 33174
Remove			
5) Change	V	Roberto Villalba	100 SW 110 Avenue, #112
X Add		 -	Miami, FL 33174
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
		- 		<u></u>	
			·		
					·
				<u></u>	···
		<u></u>			
					<u></u>

		June 9, 2017	, if other than the
	date of each amendment(s this document was signed.	s) adoption:	, II other than the
		June 9, 2017	
Effe	ctive date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note docu	If the date inserted in this ment's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) proval.	
	There are no members or nadopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Dated	19/17 Dway	
	(By the	chairman of vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
	omer o	(Typed or printed name of person signing)	
		President of Association	
		(Title of person signing)	