N06999

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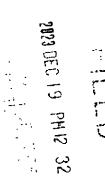
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A RAMSEY

JAN 29. 2024

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CRYSTAL COVE, Inc., A CENCLOMINIUM
DOCUMENT NUMBER: NO 6999
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LUIS MIGUEL SANTOS (Name of Contact Person)
(Name of Contact Person)
CRYSTAL COVE, Inc., A CONCLOSIVING
450 GOLDEN ISLES DR. HALL (Address)
HALLANDALE BEACH FloRIDA 33009 (City/ State and Zip Code)
Condo CRYStal Cove (O Grav). Com E-mail address: (10 be used for future annual report notification)
For further information concerning this matter, please call:
LUIS MIQUE SANTOS at 305) 580-8062 (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:
S35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

CRYSTAL COUE INC. A CONTOMINIUM
(Name of Corporation as currently filed with the Florida Dept. of State)
NO 6999
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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) HALLANDALE BERCH UN. FLORIOA 33009
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: LUIS MIGHEL SANTOS
Name of New Registered Agent: LUIS MIGHEL SANTOS 450 GOLDEN TOSS Dr. UNITAC
New Registered Office Address:
HAILANALE (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 Agenf. if changing
The state of the s

and address of each Of tAttach additional sheet. Please note the officer/d P = President; V = Vice	ficer and/or Directs, if necessary) lirector title by the President; T= Tre = Chief Financial	first letter of the office title: asurer; S= Secretary; D= Director; TR= Tru Officer. If an officer/director holds more tho	istee; C = Chairman or Clerk; CEO = Chief
	aves the corporation	m, Sally Smith is named the V and S . These s .	PST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change,
Example: XChange X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X Change Add	P	Luis Mighel Santas	450 Golder Isles Drilling HALLANDALE BEACH 2 C
Remove 2) Change Add	<u> </u>	LUIS GRONLIER SR.	Florida 33009 USO Golden Islesdr HALLANDHIE BEACH FL
Remove 3) Change Add Remove	Ī	COLESTE QUINTANA	3300 1150 Gulden Isles Dr HALLANDALE BEACIL, FL
4) Change Add	D	Richard Hodgdon	450 golden Isles Dr. HAHANDALE BEACH Fl.
Remove 5) Change Add	5_	MARIA F. Cunha	450 Galden Teles Dr. Hallow Delle BEALH
Remove 6) Change Add			F1 33009
Remove E. If amending or additional she		ticles, enter change(s) here: (Be specific)	

		
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	111 21	
The date of each amendment(s) adoption: _	11/13/2023	. if other than the
Effective date if applicable:	more than 90 days after amendment file date)	
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by twas/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

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 Dec 16, 7023
Signature
(By the chairman or vice chairman of the boated president or other officer-if directors have not been selected, by an incorporator – (IV) the bands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Luis Miguel SANTOS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)