Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000340081 3)))



H240003400813ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

**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 ALOHA CONDOMINIUM ASSOCIATION OF MIAMI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Articles of Amendment to
Articles of Incorporation
of

ALOHA CONDOMINIUM ASSOCIATION OF MAMI, INC.		
Name of Corporation as currently filed with the Florida Der	ot. of State)	
N0700000874	·	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, mendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation add	pts the following
. If amending name, enter the new name of the corporation	<u>n:</u>	
		The new
name must be distinguishable and contain the word "corporatio" "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	n" or "incorporated" or the abbrevlation "i	Corp." or "Inc."
(Principal office address MUST BE A STREET ADDRESS)	·	
· · · · · · · · · · · · · · · · · · ·		
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 new registered agent and/or the new registered office agent.	e address in Florida, enter the name of the	
Name of New Registered Agent:		
Now Registered Office Address:	(Florida street address)	
}.	, Florida	
	(City) (Zip (Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept the obligations of the g	cosition.
Sī	gnature 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: X.Change X.Remove X.Add	Y Mik	n Doc te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
i) Change Add	<u>P</u>	LORENZO ESPINOSA	55 WEST 16TH STREET APT 11
x Remove		. •	HIALEAH, FL 33010
2) Change Add	<u>P</u>	LORENZO CABRERA	55 WEST 16TH STREET APT 11
3) Remove Change Add Remove	***************************************		HIALEAH, FL 331110
4) Change Add			
Remove			
5) Change Add		<u> </u>	
Remove			
6) Change Add			
Remove			
E. <u>If amending or addit</u> (attach additional shee	ng additional A els, if necessary,	articles, enter change(s) here:). (Be specific)	
			
<u></u>			
 	 ·		
·			
-			

ioption of Amendment(s)	(CHECK ONE)	
•	sk does not man the a little and a	ats, this date will not be listed as the
and whhitratic:	(no more than 90 days after amendment file date)	
fective date if applicable:		
he date of each amendment(s) ad to this document was signed.	option: 10/8/2024	, if other than t
		·
•		
	·	·

	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	10/8/2024 Dated				
	Signature Ulm NASSA W. M.				
	(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)				
	HELEN PARRA DUNKLEY				
	(Typed or printed name of person signing)				
	TREASURER				
	(Title of person signing)				