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C. CARROTHERS

NOV 21 2013

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

<u> </u>	_		
NAME OF CORPORATION: Fontainblea	u Lakes	Mas	ter Association, Inc.
DOCUMENT NUMBER: NO7000059	946	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following	ıg:	
	quel P.	Cho	ong
	Name of Conta		
Fontainbleau Lake	s Mast	ter A	ssociation. Inc.
	(Firm/ Com		
3470 NW 82n	d Aver	iue. 🤄	Suite 988
	(Addres		
Dora	al, FL	3312	22
	City/ State and		
fsilva@s	shomac	arour	o com
E-mail address: (to be used f			
For further information concerning this matter, please ca	all:		
Frank Silva, Esq.	, 7	86	437-8658
(Name of Contact Person)			de & Daytime Telephone Number)
Enclosed is a check for the following amount made pays	able to the Flor	ida Depar	tment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	1\$43.75 Filing Certified Cop (Additional co- enclosed)	y	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division Clifton I 2661 Ex	nent Section of Corporations

Articles of Amendment to Articles of Incorporation of

Fontainbleau Lakes Maste	er Associat	ion, Inc.	distriction of the second of t
(Name of Corporation as currently f	filed with the Flo	rida Dept. of State)	Mary A
107000005946			
(Docum	ent Number of Co	rporation (if known)	
rsuant to the provisions of section 617.100 tendment(s) to its Articles of Incorporation		s, this <i>Florida Not For Proj</i>	fit Corporation adopts the follo
If amending name, enter the new name	e of the corporati	on:	٠ <u>٠</u> .
I/A			The
me must be distinguishable and contain th Company" or "Co." may not be used in th		ion" or "incorporated" or	
Enter new principa l office address, if a	annlicable:	N/A	
rincipal office address MUST BE A STR	<u>EET ADDRESS</u>)	-	
Enter new mailing address, if applical		N/A	
(Mailing address MAY BE A POST OF	FICE BOX)	1477	
. If amending the registered agent and/o	or registered offic	e address in Florida, enter	r the name of the
new registered agent and/or the new re			the mine of the
Name of New Registered Agent:	V/A		
		(Florida street address)	
New Registered Office Address:			
_			. Florida
	(City)		(Zip Code)
ew Registered Agent's Signature, if char hereby accept the appointment as registere	nging Registered ad agent. I am far	Agent: niliar with and accept the o	bligations of the position.
 :	Signature of New	Registered Agent, if changin	ng

Page 1 of 4

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>	n <u>Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DVP	Raquel P. Chong	3470 NW 82nd Ave.
Add			Suite 988
X Remove			Doral, FL 33122
2) Change	DP	Raquel P. Chong	3470 NW 82nd Ave.
X			Suite 988
Remove			Doral, FL 33122
3) Change	DVP	Angie Suarez	3470 NW 82nd Ave.
X			Suite 988
Remove			Doral, FL 33122
4) Change			
Add			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter char (Be specific)	nge(s) here:			
(and an analysis of the control of t	(be specific)				
V/A					
			 		
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		_	·		

	e date of each amendment(s) adoption:ethis document was signed.	_, if other than the
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ade	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 11 12 12 14	
	Signature / Daguer / Clary	_
	(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)	
	Raquel P. Chong	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	