

N070000006389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

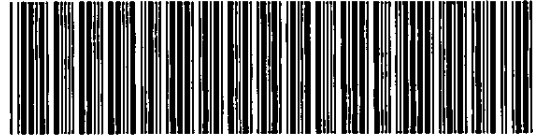
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500278588645

11/04/15--01010--004 \*\*107.00

FILED  
15 DEC 17 AM 10:18



Pam AUEA

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 5, 2015

DENIS LANOUE  
1717 N BAYSHORE DRIVE #102  
MIAMI, FL 33132

SUBJECT: MARSEILLE, A CONDOMINIUM, INC.  
Ref. Number: N07000006389

GP  
786 230-5722  
15 DEC 17 AM 10:10  
FILED

We have received your document and check(s) totaling \$107.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorrect form was submitted. Please complete form pursuant to a Florida Not for Profit Corporation, section 617.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair  
Regulatory Specialist II

Letter Number: 015A00023481

15 DEC 17 AM 8:00  
RECEIVED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Marseille, A Condominium, Inc.

DOCUMENT NUMBER: N07000006389

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Denis Lanoue  
(Name of Contact Person)

(Firm/ Company)

1717 N Bayshore Drive #102  
(Address)

Miami, FL 33132  
(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

(Name of Contact Person)

at

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

15 DEC 17 AM 10:10  
FILED

Articles of Amendment  
to  
Articles of Incorporation  
of

Marseille A Condominium, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

NO70000026389

(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)

1717 N Bayshore Drive  
# 102  
Miami, FL 33132

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: Dennis Lannoue

1717 N Bayshore Drive, #102  
(Florida street address)

New Registered Office Address:

Miami Florida 33132  
(City) (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.

X D Lannoue  
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:**

X Change                      PT      John Doe

X Remove                      V      Mike Jones

X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>PT</u>	<u>Ana Perez</u>	<u>1550 Madruga Avenue</u>
<input type="checkbox"/> Add			<u>Suite 201</u>
<input checked="" type="checkbox"/> Remove			<u>Coral Gables, FL 33146</u>
2) <input type="checkbox"/> Change	<u>V</u>	<u>George Perez</u>	<u>1550 Madruga Avenue</u>
<input type="checkbox"/> Add			<u>Suite 201</u>
<input checked="" type="checkbox"/> Remove			<u>Coral Gables, FL 33146</u>
3) <input type="checkbox"/> Change	<u>PT</u>	<u>Jean Pierre Brunois</u>	<u>1717 N Bayshore Dr #3847</u>
<input checked="" type="checkbox"/> Add			<u>Miami, FL 33132</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>V</u>	<u>Jean Pierre Brunois</u>	<u>1717 N Bayshore Dr #3847</u>
<input checked="" type="checkbox"/> Add			<u>Miami, FL 33132</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 10/21/2015

Signature George Perez Jr  
(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)

George Perez Jr  
(Typed or printed name of person signing)

Vice President  
(Title of person signing)