NM00001555

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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JUN 10 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	The Residential Comm	nunity at Park Squar	re Master Asso	ciation, Inc.
	7000011553		_	
The enclosed Articles of Amen	dment and fee are submi	tted for filing.	•	
Please return all correspondenc	e concerning this matter t	to the following:		
	R	aquel Priscila Chon	g	
	1)	Name of Contact Pe	rson)	
	The Residential Commun	nity at Park Square	Master Associa	ation, Inc.
		(Firm/ Company)	
	3470 1	NW 82nd Avenue, S	Suite 988	
		(Address)		
		Doral, FL 33122		
	(0	City/ State and Zip C	Code)	-
	mpere	z-abreu@shomagro	oup.com	
E-m	ail address: (to be used fo	or future annual rep	ort notification)
For further information concern	ing this matter, please ca	11:		
Frank Silva, Esq.		at	786	437-8658
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made paya	ble to the Florida D	epartment of S	tate:
■ \$35 Filing Fee	3\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy is sed)
Mailing Add	ress	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



The Residential Community at Park Square Master Association, Inc.

(Name of Corporation	as currently filed with the Flor	rida Dept. of State)
N07000011553		
(Docum	ent Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicat	N/A	
(Principal office address MUST BE A STREET AL	ODRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(OX) N/A	
	<u></u>	<u> </u>
D. If amending the registered agent and/or regist	arad office address in Florida	enter the name of the
new registered agent and/or the new registere		enter the name of the
Name of New Registered Agent:	N/A	
	(FI	lorida street address)
New Registered Office Address:		,
	N/A	, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		the obligations of the position.
	Signature of New Regist	tered 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	<u>V</u> <u>M</u> i	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Steve Patterson	. 315 S. Biscayne Blvd.
x Add			Miami, FL 33131
Remove			
2) Change	DVP	Raquel Priscila Chong	3470 NW 82nd Avenue, Ste. 988
Add			Doral, FL 33122
Remove			
3) X Change	DS	Al Zichella	315 S. Biscayne Blvd.
Add			Miami, FL 33131
Remove			
4) Change	S	Susette Guille	3470 NW 82nd Avenue
Add			Suite 988
x Remove			Doral, FL 33122
5) Change	D	Orestes Lopez-Recio	3470 NW 82nd Avenue
Add			Suite 988
x Remove			Doral, FL 33122
6) Change			
Add			
Remove			

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

date this document was signed.	ther than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records.	d as the
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	
Signature	
(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 Priscila Chong	
(Typed or printed name of person signing)	
Director/Vice President	
(Title of person signing)	