

NDS000000333

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DIVISION OF CORPORATIONS
2015 JUN 16 PM 2:42

Amend

JUN 17 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HIALEAH WESTVIEW CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N08000000333

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

Please return all correspondence concerning this matter to the following:

GASTON R. ALVAREZ, ESQ.

(Name of Contact Person)

GASTON R. ALVAREZ, P. A.

(Firm/ Company)

2655 S. LE JEUNE ROAD, SUITE PH-1C

(Address)

CORAL GABLES, FL. 33134

(City/ State and Zip Code)

TESSIE@GRAPALAW.COM

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

For further information concerning this matter, please call:

GASTON R. AVAREZ, ESQ.

305-443-3812

at

(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:

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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2015

GASTON R. ALVAREZ, ESQ.
GASTON R. ALVAREZ, P.A.
2655 S. LE JEUNE ROAD - STE. PH-1C
CORAL GABLES, FL 33134

SUBJECT: HIALEAH WESTVIEW CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N08000000333

We have received your document for HIALEAH WESTVIEW CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The first page is missing, please submit the document completed in its entirety.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 315A00011561

RECEIVED
15 JUN 16 AM 10:53
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 JUN 16 PM 2:42

Hialeah Westview Condominium Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000000333

(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**)

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: _____

(Florida street address)

New Registered Office Address:

(City)

_____, Florida

(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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>DP</u>	<u>ELIO PEREZ</u>	<u>4844 NW 107 Path</u>
<input type="checkbox"/> Add			<u>Doral, Fl. 33178</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>JACQUELINE PEREZ</u>	<u>4844 NW 107 Path</u>
<input type="checkbox"/> Add			<u>Doral, Fl. 33178</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>D</u>	<u>LISSETTE HERNANDEZ</u>	<u>4844 NW 107 Path</u>
<input type="checkbox"/> Add			<u>Doral, fl. 33178</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>DP</u>	<u>JAYNIER MOYA</u>	<u>6520 SW 181 Lane</u>
<input checked="" type="checkbox"/> Add			<u>SW Ranches, Fl. 33331</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>DS</u>	<u>KAREN PRIDA</u>	<u>6520 SW 181 Lane</u>
<input checked="" type="checkbox"/> Add			<u>SW Ranches, Fl. 33331</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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)

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 April 17, 2015 _____

Signature Elio Perez _____
(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)

Elio Perez _____
(Typed or printed name of person signing)

President _____
(Title of person signing)