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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: The Alcazar Condominium Inc.
DOCUMENT NUMBER: N0800000801
DOCUMENT NUMBER: 19000000000
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angelina Luxardo (Name of Contact Person)
(Name of Contact Person)
The Alcazar Condominium Inc. (Firm/Company)
(Firm/ Company)
1165 98 <sup>th</sup> St (Address)
(Address)
Bay Harbor Islands, FL 33154 (City/ State and Zip Code)
(City/ State and Zip Code)
alcaza Condoinc @ gmail. (om E-mail address: (to be used for future annual report notification)
E-man address. (to be used the future annual report notification)
For further information concerning this matter, please call:
Angelina Luxacido at (786) 218-0050 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)  \$43.75 Filing Fee 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

### Articles of Amendment to Articles of Incorporation of

The Alcazar Cor	dominium Inc.
	ntly filed with the Florida Dept. of State)
N0800000	1801
	per of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	tion:
name must be distinguishable and contain the word "corpora	The new ntion" 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	1165 98th St
	Bay Harbor Islands, FG 331594
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as above
	(A)
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office:	
Name of New Registered Agent:	Ingelina Luxardo
New Registered Office Address:	(Florida street address)
	Harbor Islands, Florida 33154 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo	
	The state of the s
——————————————————————————————————————	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 X Remove X Add	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	Name .	<u>Addres</u> s
Change Add Remove	<u>P</u>	Robert Pino	1165 98th St #501  Bay Harbor Islands, FL 33154
2) Change Add Remove	工	Suely Caramelo	1165 98th St # 402 Bay Harbor Islands, FL 33154
3 ) Change Add Remove	P	Eduardo Brandon Luxardo	1165 98th #202 Bay Harbor Islands, FL 33154
4) Change Add Remove	<u>T</u>	Diana Pino	1165 98th St #501 Bay Harbor Islands, FL 33154
5) Change Add Remove	_5_	Angelina Luxardo	1165 98th st #302 Bay Hurbor Islands, FL 33154
6) Change Add (Ass	AS istant) retary)	Leila Elias	1165 98th S+#303 Bay Harbor Islands FL 33154

. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)	•
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The date of each amendment(s) ad	option:	, 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 blod document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendme l.	nt(s)
There are no members or membadopted by the board of director	vers entitled to vote on the amendment(s). The amendment(s) was/weers.	re:
Dated 9/9	116/	
Signature		
have not bee	man or vice chairman of the board, president or other officer-if direct on selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
<u>-/</u> /	Educado Brandon Luxardo (Typed or printed name of person signing)	<del></del>
*	President (Title of person signing)	