## N08000002341

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	HADE BEACH CONI	DOMINIUM ASSO	CIATION, INC	<u>.                                    </u>
N080 DOCUMENT NUMBER:	000002341			
The enclosed Articles of Amenda	nent and fee are subm	nitted for filing.		
Please return all correspondence of	concerning this matter	r to the following:		
VERONICA MORAN				
		(Name of Contact Pe	erson)	
		(Firm/ Company	, <u> </u>	
		(i iiii Company	, ,	
17001 COLLINS AVE				
- 1		(Address)		<del> </del>
SUNNY ISLES BEACH				
	(	(City/ State and Zip	Code)	
MGR@JBMIAMI.COM				
E-mail	address: (to be used	for future annual rep	ort notification	
For further information concerning	g this matter, please of	call:		
VERONICA MORAN		at	305	354-0680
(Nam	e of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	ing amount made pay	yable to the Florida l	Department of	State:
■ \$35 Filing Fee □\$4 C	13.75 Filing Fee & [ ertificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy is seed)
Mailing Addre	ss	Str	eet Address	

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

JADE BEACH CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida I	Dept. of State)		—
N08000002341			
(Document Numb	er of Corporation (if	known)	_
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the follow	ving
A. If amending name, enter the new name of the corporat	<u>ion:</u>		
		The r	
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorpora	ted" or the abbreviation "Corp." or "Inc	r. "
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)	2.65	
			)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			)
<u> </u>		2670 (17. 7.)	<del>-</del>
			رن کن
	<del></del>		لب
D. If amending the registered agent and/or registered office	ce address in Floric	la, enter the name of the	
new registered agent and/or the new registered office a	<u>ddress:</u>		
Name of New Registered Agent:			
<del></del>		an in	
New Registered Office Address:		(Floridu street address)	
		, Florida	
<del></del>	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		nt the obligations of the position	
agent. Tumju	THE WILL WILL	prime congunous of the position.	
Si	enature of New Rev	stered 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.

mine somes, · as hemove	,		
Example: X Change X Remove X Add	<u>v</u> <u>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	D	ELANA GOLDBLAT	17001 COLLINS AVE. SUNNY ISLES BCH, FL. 33160
X Remove			
2) Change Add			
Remove 3 ) Remove Add Remove	<del></del>		
4) Change Add	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
F. If amending or additional she	ing additions sets, if necess	al Articles, enter change(s) here: eary). (Be specific)	
		<u> </u>	

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		<u></u>
The date of each amendment(s) adoption: _ date this document was signed.		, if other than the
Effective date if applicable:		
(no	more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department	ot meet the applicable statutory filing requirements, this date will not bof State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	

Date	1 11 05 2020
Sign	(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)
	Enrico Mezzalva (Typed or printed name of person signing)
	Vice President (Title of person signing)