N08000003500

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section

COVER LETTER

Division of Corporations VILLA DUZZI CONDOMINIUM ASSOCIATION Inc. NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Alex URibe Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment
to Articles of Incorporation
of a
VILLA DUZZI CONDOMINIUM ASSOCIATION Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
N 0800000 3500
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N/A 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: 1200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
New Registered Office Address: 1308 SALZEDO STREET (Floridu street address)
CORAL GABLES Florida 33134 (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. Signature of New Registered Agent, if changing
signature oj New Registerea Agent, ij 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>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change Add	<u> 36</u>	Cheeben a achnerder	1308 SALZEDO STEEET CORAL GABLES JL 33124
Remove 2) Change Add	DT	ARCELIA RODRIGUEZ	1308 SALZONO STREET CORAL GABLES FL
Remove 3) Change Add Remove			J 3313A
4)Change Add	DP	ALEX URIBS	1308 SALZEDO STREET CORAL SABIES 3 3313A
Remove 5) Change Add			
Remove 6) Change Add			
Remove E. If amending or addi	ing additional .	Articles, enter change(s) here:	
(attach additional she			

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The data of each amondment(c) a	doption:, if other th
The date of each amendment(s) a date this document was signed.	doption, a other or
_	November 2, 2022
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more man so days after amenament file date)
Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not be listed as t epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
	adopted by the members and the number of votes cast for the amendment(s)

Dated	11/1/2022
Signature	Gregory W Schneider
have no	hairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
<u>_</u> G	REGORY W Schneider (Typed or printed name of person signing)
_	Director / Fresident
	(Title of person signing)

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