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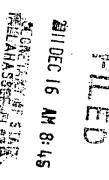
(Requestor's Name)		
(Address)	70021	
(Address)	, 552	
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	12/16/11-	-01007016
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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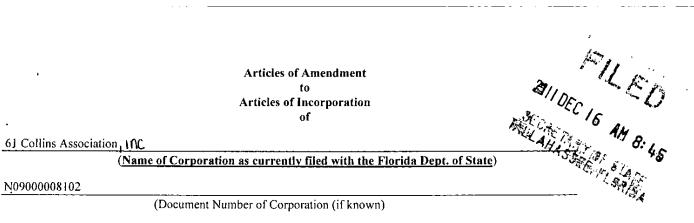
COVER LETTER

TO: Amendment Section Division of Corporations

·		
NAME OF CORPORATION: 61 Collins Associat	ion, Inc	
· CVA CTATALANTA NOOCOOOOOOOOOOO		
DOCUMENT NUMBER: <u>N09000008102</u>		
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Stacie Warren		
(Na	me of Contact Person)	
Regatta Real Estate Management		
	(Firm/ Company)	
701 4th Street Suite 101		
	(Address)	
Miami Beach, FL 33139	./ C4-4 4 7(C- 4-)	
(Cir	y/ State and Zip Code)	
rtania@ragattarenlastata anm		
stacie@regattarealestate.com E-mail address: (to be use	d for future annual report	notification)
For further information concerning this matter, please		
ror further information concerning this matter, please	e can:	
Stacie Warren	or (305	\ 673 1940
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Dep	artment of State:
☑ \$35 Filing Fee □\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
Certificate of Status	Certified Copy	Certificate of Status
	(Additional copy is enclosed)	Certified Copy (Additional Copy is
	cholonedy	enclosed)
Mailing Address	Ctraat	Address
Amendment Section		Iment Section
Division of Corporations	Divisio	on of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment



Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the

	ble and contain the word "corporation" or "incorporated" or th "Co." may not be used in the name.	ne abbreviatio
B. Enter new principal office ac (Principal office address <u>MUST</u>		
C. Enter new mailing address, (Mailing address MAY BE A	applicable: OST OFFICE BOX)	
	nt and/or registered office address in Florida, enter the name te new registered office address: gent:	e of the
new registered agent and/or	e new registered office address:	e of the

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)	Name		Address
1) TRS	Robert Wolfson		61 Collins Ave
•			Unit 503 Miami Beach, FL 33139
2) <u>S</u>	Fernando Vivanco		61 Collins Ave Unit 403
			Miami Beach, FL 33139
3)		_	
4)		_	
5)	-	_	
6)		_	
<u>If REMOVING</u>	G an officer and/or director, please list the	title(s) and	I name of the officer/director to be removed:
Title(s)	<u>Name</u>	Title(s)	Name
1) <u>S</u>	Sabina Torrieri	4)	
2) <u>·TRS</u>	Eduardo Martinez	5)	
3) D	Heans M Salort		

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)			
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The da	ite of each amendment(s) adoption: 11/03/10
Effecti	ve date if applicable: 11/03/10
	(no more than 90 days after amendment file date)
Adopti	ion of Amendment(s) (<u>CHECK ONE</u>)
	ne amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) as/were sufficient for approval.
	nere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
	Dated 11/17/2011
	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) Alvaro Naranjo (Typed or printed name of prior on signing)
	President (Title of person signing)

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