N10000003739

_		
(Red	questor's Name)	
(Add	dress)	<u> </u>
,	ŕ	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(D.,,	rianna (Makika Nan	
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
<u> </u>		
Special Instructions to F	Filing Officer:	
<u> </u>		





300431761033

06/21/24--01013--016 ++43.75

M

COVER LETTER

TO: Amendment Section Division of Corporations

Ł

NAME OF CORPORATION	Biltmore Neighborho	ood Association, Inc	ì. 		
	N10000002739				
DOCUMENT NUMBER:					
The enclosed Articles of Am	nendment and fee are subr	nitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
Christopher Kottke					
		(Name of Contact	Person)		
Biltmore Neighborhood As	sociation				
		(Firm/ Compa	ny)		-
3267 Riviera Drive					
	·	(Address)	 - -		
Coral Gables, Florida 3313	4				
	-	(City/ State and Zi	Code)		
biltmoreneighborhoodassn(@gmail.com				
1	-mail address: (to be used	for future annual r	eport notific	ation)
For further information con-	cerning this matter, please	call:			
Christopher Kottke			202		573-7217
	(Name of Contact Person		(Area Co	de)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florid	a Departmer	nt of S	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	ris C	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	Address ent Section	<u>\$</u>	Street Addr	ess	0.0
	ent Section of Corporations		Amenament Division of C		

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Biltmore Neighborhood Association, Inc.

:

Name of Corporation as currently filed with the Florida D	Dept. of State)	
N10000002739		
(Document Number	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the follo	wing
A. If amending name, enter the new name of the corporat	tion:	
N/A	The	new
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.		_
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office	ice address in Florida, enter the name of the	
new registered agent and/or the new registered office a	address:	
Name of New Registered Agent: N/A		
	(Florula street address)	_
New Registered Office Address:		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		
	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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change Add	<u>VD</u>	Joseph Scott	3272 RIVIERA DRIVE CORAL GABLES, FL 33134
Remove 2) Change Add	PD	Christopher Kottke	3267 RIVIERA DRIVE CORAL GABLES, FL 33134
Remove Change X Add Remove	TD	Albert Sanchez	619 CAMILO AVENUE CORAL GABLES, FL 33134
4) Change Add	<u>SD</u>	AnaElena Multach	3290 RIVIERA DRIVE CORAL GABLES, FL 33134
Remove 5) Change Add X Remove	PD	Carlos Carta	715 ANASTASIA AVENUE CORAL GABLES, FL 33134
6) Change Add	VPD	Dr. Tina Carroll-Scott	3272 RIVIERA DRIVE CORAL GABLES, FL 33134
E. If amending or addir (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
	_		

					
					
<u> </u>				<u></u>	
					
					·
		<u></u>	 -	_	
.		_	<u>.</u>		
			_		 .
					
					.
					
			-		
	<u> </u>	-	<u>. </u>		
	<u></u>	<u> </u>			
					•
					·
					٠ ـــ
					-
The date of each amendment(s date this document was signed.	s) adoption:				, if other than the
Effective date if applicable:	June 10, 2024				
	(no more than	90 days after amen	dment file date)		
Note: If the date inserted in this document's effective date on the	block does not meet the Department of State's r	e applicable statutory ecords.	y filing requirem	ents, this date will no	t be listed as the
Adoption of Amendment(s)	(СНЕСК О	<u>NE</u>)			
The amendment(s) was/wer was/were sufficient for app	re adopted by the memb roval.	ers and the number (of votes cast for t	he amendment(s)	

Dated	June 10, 2024
	Contract
Signatu	(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)
	Christopher Kottke
	(Typed or printed name of person signing)

(Title of person signing)