Division of Corporations

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000179298 3)))



H160001792983ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : APSIDES LLC Account Number : I20130000089 : (305)260-6912 Phone

Fax Number : (305)675-0775

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. *

E mail	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN BRICKELL ROADS ATRIUMS CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	08
Estimated Charge	\$35.00

JUL 27 2016

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION	BRICKELL ROADS	ATRIUMS CONDO	MINIUM AS	SOCIATION, INC.	
	N10000006163				
DOCUMENT NUMBER:					
The enclosed Articles of Am	endment and foo are subn	nitted for filing.			
Please return all corresponde	nce concerning this matte	r to the following:			
Carlos Alamo					
		(Name of Contact Pe	rson)		
Apsides LLC					
		(Firm/ Company	·)		
1430 S Dixie Hwy Ste 317					
		(Address)			
Coral Gables FL 33146					
		(City/ State and Zip t	Code)		
calamo@apsidesmgt.com					
E	-mail address: (to be used	for future unnual rep	ort notificatio	n)	
For further information conc	erning this matter, please	call:			
Carlos Alamo		nt	305	2606912	
	(Name of Contact Person)		(Area Code)	(Daytime Telepho	ne Number)
Enclosed is a check for the fe	ollowing amount made pa	yable to the Florida I	Department of	State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing A			ect Address nendment Sect	ion	

Division of Corporations

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

From: Carlos Alamo

Articles of Amendment to Articles of Incorporation

BRICKELL ROADS ATRIUMS CONDOMINIUM	ASSOCI	IATION, INC.			
<u> </u>	current	ly filed with the Florida Dept.	of State)		
N10000006163					
(Documer	nt Numbe	er of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statute:	s, this <i>Florida Not For Profit C</i>	orporation adopts the	following	
A. If amending name, enter the new name of the co	orporatio	<u>oni</u>		***	
rume must be distinguishable and cantain the word "c "Comnany" or "Co," may not be used in the name.	corporati	ion" or "invorporated" or the a	thbreviation "Corp." (_The new or "Inc."	
B. Enter new principal office address, if applicable	e:	1430 S Dixie Hwy Ste 317			
(Principal office address <u>MUST BE A STREET AD</u>		Coral Gables FL 33146		2#	
			ر به ویمار خدید ویمار بدوند		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1430 S Dixie Hwy Ste 317	75.25 75 75 75 75 75 75 75 75 75 75 75 75 75	L 26	
· · · · · · · · · · · · · · · · · · ·	_	Coral Gables FL 33146	0	ĥ	
			22 22 23 24	<u> </u>	
D. If amending the registered agent and/or register	red offic	e address in Florida, enter the	name of the	00	
new registered agent and/or the new registered					
Name of New Revistered Agent:	u: Carlos Alumo				
<u> </u>	430 S Di:	xie Hwy Ste 317			
New Registered Office Address:		(Florida street	address)		
C	oral Gab	les	, Florida		
_	(Ciry)		(Zip Code)		
New Registered Agent's Signature, if changing Res I hereby accept the appaintment as registered agent.			uions of the position.		
	Si	gnature of New Registered Agen	n, if changing		

Page 1 of 4

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:

(Assach additional sheets, if necessary)

Please note the officeridirector 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 officeridirector 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, Salty 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>Mi</u>	n <u>Doc</u> ke <u>Jones</u> ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Chunge	P	Paricia Morrow	1712 SW 2ND AVE., APT. 509
Add			MIAM1, FL 33129
X Remove			
2) Change	P	Jorge Barragan	1712 SW 2ND AVE., APT. 504
X Add			MIAM1, FL 33129
Кевкіче			
3) Change			
Add			
Renuive			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	

L. If amending or adding additional Articuach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
-	

		7/18/2016	
The	date of each amendment	i(s) adoption:	, if other than the
dute	this document was signed	•	
	•	7/18/2016	
КЩ	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
		nis block does not meet the applicable statutory filing requirements, this date will not be be because of State's records.	be listed as the
Ade	uption of Amendment(s)	(CHECK ONE)	
□	The amendment(s) was/w was/were sufficient for a	were adopted by the members and the number of votes east for the amendment(s) oppoval.	
	There are no members or adopted by the board of o	members entitled to vote un the amendment(s). The amendment(s) was/were directors.	
	7/26/	2016	
	Dated		
		201-04	
	_ ((_\tag{\partial}\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Signature		_
		chairman or vice chairman of the board, president or other officer-if directors	
		not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	Californ	court appointed fiduciary by that fiduciary)	
	Ca	rios Alamo	
		(Typed or printed name of person signing)	
	Tn	sasurer	
	_	(Title of person signing)	