## NI1525

-	(Requ	uestor's Name)	)
	(Addı	ress)	-
	(Addı	ress)	
	(City/	/State/Zip/Phor	ne #)
PICK-UF	>	MAIT WAIT	MAIL
	(Busi	iness Entity Na	ame)
	(Doc	ument Number	r)
Certified Copies		Certificate	es of Status
Special Instructions	to F	iling Officer:	

Office Use Only



400333105884

08/13/19--01/017--029 (+435.0%

2019 AUS 19 AH 8: 58

C. GOLDEN AUG 2 9 2019

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Berkeley Square Association, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alexander Ludwige
(Name of Contact Person) (Firm/ Company) Dakland Park, FL 33334 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee \$35 Filing Fee \$\Bigsup \$43.75 Filing Fee & \$\Bigsup \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation of

- 1 	•	3	, 2014   Little	
		•	77	

		01		
Berkei	le Square	Association, Inc	. 21	019 AM 8:
(Name of Co	moration as curr	ently filed with the Flor	ida Dept. of State)	· · · · · · · · · · · · · · · · · · ·
	N1152	5		
		mber of Corporation (if k	nown)	
rsuant to the provisions of section 617. endment(s) to its Articles of Incorpora		utes, this Florida Not Fo	r Profit Corporation	adopts the following
If amending name, enter the new na	ame of the corpor	ation:		
				The new
me must be distinguishable and contai company" or "Co." may not be used in	n the word "corpo the name.	ration" or "incorporated	l" or the abbreviation	"Corp." or "Inc."
Enter new principal office address, rincipal office address MUST BE A S		<u>(x</u> )	<i></i>	
Enter new mailing address, if appl (Mailing address MAY BE A POST				
		_/_		
If amending the registered agent an new registered agent and/or the ne	w registered offic	e address:	enter the name of th	ne
Name of New Register.		exander Ludwig	<del></del>	
W . D		79 N. Dixie Hig	hway, # 369 Iorida Greet address)	
<u>New Registered Offic</u>		11 10 .		2221
	_ Va	Wand Park	, Floric	ia <u>33334</u> Code)
		(City)	(2.1).	Code)
ew Registered Agent's Signature, if conversely accept the appointment as regis	changing Register tered agent. I am	ed Agent: familiar with and accep	the obligations of the	e position.
		Alexander of	ludin	
	<del></del>	Signature of New Regis	tered Agent, if changi	ing

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>Doe</u> <u>Jones</u> <u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)	Secretary/Tre	asurer Lindo Lanzana	5201 NE 14 Lerrace #208 Ft. Landerdale, FL 33334
2) Change Add	President	Jessica Holley	5200 NE 14 Way # 304 Ft. Landedsle, FC 33334
<ul> <li>Remove</li> <li>Change</li> <li>Add</li> <li>Remove</li> </ul>	Vice President	Evjezdana Varano	5201 NE 14 H Corace  # 205  Ft. Landrobale, FL 33334
4) Change Add X Remove	Treasurer	Alma Ubilla	5200 NE 14 th Way # 404 Ft. Canolidale, FC 33334
5) Change Add Remove	Prosident	Alexander Lording	SLOI NE 14 th Carrace # 203 Ft. Landerdale, FL 33338
6) Change Add Remove			

f amending or adding attach additional sheets	s, if necessary).	(Be specific)						
							<del> </del>	
			<del> </del>	<u></u>			_	
							<del></del>	
				<del></del>				
			<del></del>	<u> </u>	.,,			_
						<u> </u>		
<u> </u>				···		_		_
	<del>-</del>	<u> </u>	<del>_</del>					
			_ <u>_</u> _				<del> </del>	_
					-	<del></del>		
		<del></del>						
			· · · · ·					
				·	<u> </u>	<del></del>	<del></del>	
							<u></u>	
<u> </u>			-					
			<del>-</del>					
					<u>-</u>			
				-		<del></del> -		
<u> </u>	<del></del>	<u>.                                    </u>					<del></del> -	_
				<del> </del>		<del></del> ,	<del> </del>	

The date of each amen date this document was	idment(s) adop signed.	tion: <u>04/24/2019</u>	<b>}</b>	, if other than the
Effective date <u>if applic</u>	able:			
<del></del>		(no more than 90 days after	amendment file date)	
		does not meet the applicable stat tment of State's records.	utory filing requirements, this date will n	ot be listed as the
Adoption of Amendme	ent(s)	(CHECK ONE)		
☐ The amendment(s) was/were sufficien	•	ted by the members and the num	ber of votes cast for the amendment(s)	
There are no membadopted by the box	bers or members ard of directors.	s entitled to vote on the amendme	ent(s). The amendment(s) was/were	
Dated	07/24	La 19 La Suding	-	
Signature	_ Clus	de Sudan		<del></del>
	have not been :		president or other officer-if directors in the hands of a receiver, trustee, or y)	
		Lexander Ludwig (Typed or printed na	ome of person signing)	
		(Typed of print <b>ea</b> na	une or person signing,	
		President		
		(Title of	person signing)	