

N120000003006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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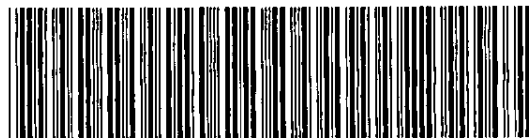
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
13 FEB 25 AM 9:56

Amend  
@ 2/27/13

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Palazzo Malaga Condominium Association, Inc.

DOCUMENT NUMBER: N12000003006

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lianys Cortes

(Name of Contact Person)

(Firm/ Company)

4948 SW 136 PL

(Address)

Miami, Florida 33175

(City/ State and Zip Code)

lianys85@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lianys Cortes

(Name of Contact Person)

at ( 786 ) 337-0339

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

**PALAZZO MALAGA CONDOMINIUM ASSOCIATION, INC.**

(Name of Corporation as currently filed with the Florida Dept. of State)

**N12000003006**

(Document Number of Corporation (if known))

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

**4948 SW 136 PL**

**Miami, Florida 33175**

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**4948 SW 136 PL**

**Miami, Florida 33175**

**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:

**Lianys Cortes**

**4948 SW 136 PL**

(Florida street address)

New Registered Office Address:

**Miami**

(City)

**33175**

(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

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13 FEB 25 AM 9:56  
CLERK OF SUPERIOR COURT  
MIAMI, FLORIDA

**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:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)   | <u>Title</u> | <u>Name</u>                  | <u>Address</u>   |
|--|--------------|------------------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>P</u>     | <u>James Beauchamp</u>       | <u>2100 PONCE DE LEON BLVD., SUITE 825</u><br><u>CORAL GABLES, FLORIDA 33134</u> |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>T</u>     | <u>Blaik Ross</u>            | <u>2100 PONCE DE LEON BLVD., SUITE 825</u><br><u>CORAL GABLES, FLORIDA 33134</u> |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>S</u>     | <u>Jamie Artzt</u>           | <u>2100 PONCE DE LEON BLVD., SUITE 825</u><br><u>CORAL GABLES, FLORIDA 33134</u> |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>     | <u>Christiano Marchesini</u> | <u>622 Malaga Avenue</u><br><u>Coral Gables, Florida 33134</u>                   |
| 5) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>     | <u>Eugenio Gonzalez</u>      | <u>624 Malaga Avenue</u><br><u>Coral Gables, Florida 33134</u>                   |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D</u>     | <u>Juan Carlos Sabillon</u>  | <u>620 Malaga Avenue</u><br><u>Coral Gables, Florida 33134</u>                   |

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: \_\_\_\_\_

2/21/13

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

2/21/13

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)

JAMES BEAUCHAMP

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)