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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

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

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN 544-548 FERNWOOD ROAD CONDOMINIUM ASSOCIATION, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
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Corporate Filing Menu

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T. ROBERTS

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## Articles of Amendment to Articles of Incorporation of

| of   |   |
|--|---|
| 544-548 FERNWOOD ROAD CONDOMINIUM ASS  | SOCIATION, INC.                         |
| (Name of Corporation as currently filed with the Florida Dept. of State)   |   |
| N12000006904   |   |
| (Document Number of Corporation (if known)   |   |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For I</i> amendment(s) to its Articles of Incorporation. | Profit Corporation adopts the following |
| A. If amending name, cuter the new name of the corporation:  |   |
|  | The new                                 |
| name must be distinguishable and contain the word "corporation" or "incorporated"<br>"Company" or "Cu," may not be used in the name.           | or the abbreviation "Corp." or "Inc."   |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)                                      |   |
|  |   |
| C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX)  |   |
|  |   |
| D. If amending the registered agent and/or registered office address in Florida, e   | nter the name of the                    |
| new registered agent and/or the new registered office address:   |   |
| Name of New Registered Agent;  |   |
| (Fiorida street address)  New Registered Office Address:   |   |
|  |   |

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.

(City)

Signature of New Registered Agent, if changing

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Florida

(Zip Code)

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 | Y Mik        | n <u>Doe</u><br>te <u>Jones</u><br>y <u>Smith</u> |                      |
|-----------------------------------|--------------|---|----------------------|
| Type of Action<br>(Check One)     | <u>Title</u> | <u>Name</u>                                       | <u>Addres</u> s      |
| ()Change                          | D            | CALERO, ROSA                                      | 1548 BRICKELL AVENUE |
| Add                               |              | •   | 2ND FLOOR            |
| X Remove                          |              |   | MIAMI FL 33129       |
| 2) Change                         | D            | SERRANO, ESTELA                                   | 1548 BRICKELL AVENUE |
| Add                               |              | ••••••••••••••••••••••••••••••••••••••            | 2ND FLOOR            |
| X                                 |              |   | MIAMI FL 33129       |
| 3) Change                         | Q            | WEISSON, ERNESTO                                  | 1548 BRICKELL AVENUE |
| X                                 |              |   | 2ND FLOOR            |
| Remove                            |              |   | MIAMI FL 33129       |
| 4) Change                         | D            | VIERIA, KARLA                                     | 1548 BRICKELL AVENUE |
| X Add                             |              |   | 2ND FLOOR            |
| Remove                            |              |   | MIAMI FL 33129       |
| 5) Change                         |              |   |                      |
| Add                               |              |   |                      |
| Remove                            |              |   |                      |
| 6)Change                          |              |   |                      |
| Add                               |              |   |                      |
| Remove                            | •            | Page 2 of 4                                       |                      |
|                                   |              |   |                      |

| (f amending or adding additional Arti<br>attach additional sheets, if necessary). | (Be specific) |  |  |
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signing)

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