

N13000007320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

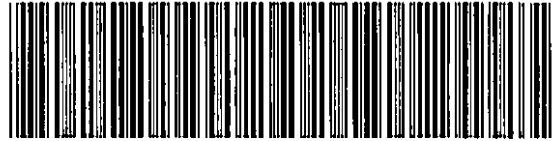
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TALLAHASSEE, FLORIDA

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S. YOUNG

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9/20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2018

BRIAN R HERSH, ESQUIRE
LAW OFFICE OF BRIAN R HERSH
1541 BRICKELL AVENUE STE C-1407
MIAMI, FL 33129

SUBJECT: BTEQ CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N13000007320

We have received your document for BTEQ CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 818A00019407

RECEIVED
13 Oct 1 2018
SECRETARY
TALLAHASSEE

Law Office of Brian R. Hersh

Brian R. Hersh
Attorney At Law

Email: bhershlaw@att.net

September 25, 2018

Sent Via E-Mail:

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: BTEQ Condominium Association, Inc.
Document Number N13000007320

Gentlemen:

Enclosed are Articles of Amendment. Please process the enclosed.

Very truly yours,

Law Office of Brian R. Hersh

BY: **Brian R. Hersh***

Brian R. Hersh, Esquire

*(Electronically Signed)

BRH/ar

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1541 Brickell Avenue, Suite# C-1407, Miami, FL. 33129 * Office Tel. (305)-371-6294
Direct Tel. (305)-546-8505 * Home Tel. (305)-860-0800 * Fax (305)-371-2413 * E-Fax (305)-397-1440

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BTEQ CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N13000007320

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

Please return all correspondence concerning this matter to the following:

BRIAN R. HERSH

(Name of Contact Person)

LAW OFFICE OF BRIAN R. HERSH

(Firm/ Company)

1541 BRICKELL AVENUE, STE. C-1407

(Address)

MIAMI, FLORIDA 33129

(City/ State and Zip Code)

bherشلaw@att.net

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

For further information concerning this matter, please call:

BRIAN R. HERSH

305

371-6294

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

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

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
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

BTEQ CONDOMINIUM ASSOCIATION, INC.

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

N13000007320

(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)

N/A

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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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TALLAHASSEE, 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> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|--------------------------|-------------------------------|
| 1) <input type="checkbox"/> Change | <u>SVD</u> | <u>TANIA VALLEJO</u> | <u>2244 N.W. 114TH AVENUE</u> |
| <input type="checkbox"/> Add | | | <u>NORTH UNIT</u> |
| <input checked="" type="checkbox"/> Remove | | | <u>MIAMI, FLORIDA 33172</u> |
| 2) <input type="checkbox"/> Change | <u>D</u> | <u>RICARDO AROSEMENA</u> | <u>2244 N.W. 114TH AVENUE</u> |
| <input type="checkbox"/> Add | | | <u>MIAMI, FLORIDA 33172</u> |
| <input checked="" type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | <u>SVD</u> | <u>BARBARA CONTINO</u> | <u>2244 N.W. 114TH AVENUE</u> |
| <input checked="" type="checkbox"/> Add | | | <u>MIAMI, FLORIDA 33172</u> |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | <u>D</u> | <u>PEDRO MOSRI</u> | <u>2244 N.W. 114TH AVENUE</u> |
| <input checked="" type="checkbox"/> Add | | | <u>MIAMI, FLORIDA 33172</u> |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:

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

N/A

SEPTEMBER 25, 2018

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

SEPTEMBER 25, 2018

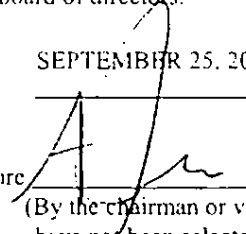
Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 SEPTEMBER 25, 2018 _____

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)

AJAY KHANNA

(Typed or printed name of person signing)

PSD

(Title of person signing)