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COVER LETTER

TO: Amendment Section Division of Corporations

SURF CLUB OF	SURFSIDE COND	OMINIUM A	SSOCIATION, INC.	
NAME OF CORPORATION:				
N14000001704				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	itter to the following:	:		
	(Name of Contact	Person)		
	(Firm/ Compa	any)		
176 N.E. 43RD STREET				
	(Address)	<u>.</u>	··	
MIAMI, FL 33137				
	(City/ State and Z	ip Code)		
kspace@fortpartners.com				
E-mail address: (to be us	ed for future annual	report notifica	tion)	
For further information concerning this matter, pleas	se call:			
MIGLE GECIAUSKAITE		786	4822325	
		at	<u> </u>	
(Name of Contact Perso	on)	(Area Cod	e) (Daytime Telephone	Number)
Enclosed is a check for the following amount made	payable to the Floric	la Department	of State:	
XI \$35 Filing Fee ☐ S43.75 Filing Fee & Certificate of Status		Ce y is Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nclosed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles	s of Incorporation
SURF CLUB OF SURFSIDE CONDOMINIUM ASSOCIA	of ATION, INC.
(Name of Corporation as currently filed with the Florida D N14000001704	Dept. of State)
(Document Numbe	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati N/A	ion: The new
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A PER T
	SSEE P
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 2:2
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a N/A Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position,
	ignature of New Registered Agent, if changing

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 Doc 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>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	Р	ACHI, RAMZI	9001 Collins Ave., UNIT 910
X Remove			SURFSIDE, FL 33154
2) X Change Add	<u>P</u>	SPACE, KEITH	176 N.E. 43RD STREET MIAMI, FL 33137
Remove 3) Change X Add Remove	<u>T</u>	LEFRAK, HARRISON T.	9001 COLLINS AVE UNIT SPH11 SURFSIDE, FL 33154
4) Change Add			
Remove 5) Change Add			EM B T
Remove 6)ChangeAdd		 	9 PR 2: 2
E. If amending or ad (attach additional s		Articles, enter change(s) here: v). (Be specific)	

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	APRIL 25TH , 2022		
The date of each amendment(s) adoption date this document was signed.	:		, if other tha
Effective date if applicable:			
<u></u>	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does document's effective date on the Departme	s not meet the applicable statutory filing requirements, this d	ate will no	or be listed as th
document's effective date on the Departme	in or state 8 records.		

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

DocuSign E	nvelope ID: E46CB85E-6B3B-491C-933E-EC7816CDEF2A	
	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	
	Signature Keith J. Space	_
	(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)	
	KEITH SPACE	71
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)