

N14000003010

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(Address)

(Address)

(City/State/Zip/Phone #)

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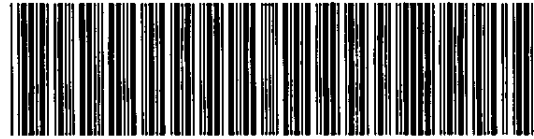
(Business Entity Name)

(Document Number)

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**COVER LETTER**

16 NOV -7 PM 4:31  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Miami Dade City and County Management Association, Inc.

DOCUMENT NUMBER: N14000003010

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

Please return all correspondence concerning this matter to the following:

Rafael Casals

(Name of Contact Person)

Town of Cutler Bay

(Firm/ Company)

10720 Caribbean Blvd., Suite 105

(Address)

Cutler Bay, FL 33189

(City/ State and Zip Code)

rcasals@cutlerbay-fl.gov

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

For further information concerning this matter, please call:

Rafael Casals

305

234-4262

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:

- |   |  |   |  |
|---|--|---|--|
| <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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 NOV -7 PM 4:31

Miami Dade City and County Management Association, Inc.

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

N14000003010

(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**)

Town of Cutler Bay

10720 Caribbean Blvd., Suite 105

Cutler Bay, FL 33189

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

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

Town of Cutler Bay

10720 Caribbean Blvd., Suite 105

Cutler Bay, FL 33189

**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:

Rafael G. Casals

10720 Caribbean Blvd., Suite 105

(Florida street address)

New Registered Office Address:

Cutler Bay

(City)

Florida 33189

(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*

**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	PT	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	V	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	SV	<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>President</u>	<u>William M. Serda</u>	<u>17011 NE 19th Avenue</u>
<input type="checkbox"/> Add			<u>North Miami Beach, FL 33162</u>
<input checked="" type="checkbox"/> Remove			<u></u>
2) <input checked="" type="checkbox"/> Change	<u>President</u>	<u>Rafael G. Casals</u>	<u>Town of Cutler Bay</u>
<input type="checkbox"/> Add			<u>10720 Caribbean Blvd., Suite 105</u>
<input type="checkbox"/> Remove			<u>Cutler Bay, FL 33189</u>
3) <input checked="" type="checkbox"/> Change	<u>VP</u>	<u>Shari Kamali</u>	<u>City of South Miami</u>
<input type="checkbox"/> Add			<u>6130 Sunset Drive</u>
<input type="checkbox"/> Remove			<u>South Miami, FL 33143</u>
4) <input checked="" type="checkbox"/> Change	<u>Treasurer</u>	<u>Edward A. Rojas</u>	<u>City of Doral</u>
<input type="checkbox"/> Add			<u>8401 NW 53rd Terrace, Suite 100</u>
<input type="checkbox"/> Remove			<u>Doral, FL 33166</u>
5) <input type="checkbox"/> Change	<u>Secretary</u>	<u>Andrea M. Agha</u>	<u>Town of Miami Lakes</u>
<input checked="" type="checkbox"/> Add			<u>6601 Main Street</u>
<input type="checkbox"/> Remove			<u>Miami Lakes, FL 33014</u>
6) <input type="checkbox"/> Change	<u></u>	<u></u>	<u></u>
<input type="checkbox"/> Add			<u></u>
<input type="checkbox"/> Remove			<u></u>

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

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

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 10/19/16

Signature Rafael Casals  
(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)

RAFAEL G. CASALS  
(Typed or printed name of person signing)

President - MDCCMA  
(Title of person signing)