N14000003010

_____
(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

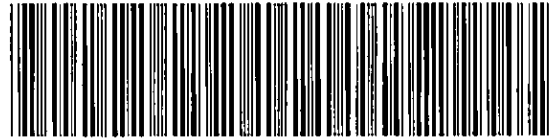☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

07/14/17--01023--010   **35.00

JUL 18 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

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

N14000003010
DOCUMENT NUMBER: _____

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:

☒ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☐ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
         Certificate of Status   Certified Copy   Certificate of Status
                          (Additional copy is   Certified Copy
                          enclosed)   (Additional Copy is
                                            Enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                    Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

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)

City of Doral

8401 NW 53 Terrace, 3rd Floor

Doral, FL 33166

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

City of Doral

8401 NW 53 Terrace, 3rd Floor

Doral, FL 33166

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:

Edward A. Rojas

8401 NW 53 Terrace, 3rd Floor

(Florida street address)

New Registered Office Address:

Doral _____, Florida 33166
(City)   *(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

Page 1 of 4

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	P	Rafael G. Casals	Town of Cutler Bay 10720 Caribbean Blvd., Suite 105 Cutler Bay, FL 33189
2) ___ Change ___ Add X Remove	VP	Shari Kamali	City of South Miami 6130 Sunset Drive South Miami, FL 33143
3) X Change ___ Add ___ Remove	P	Edward A. Rojas	City of Doral 8401 NW 53 Terrace, 3rd Floor Doral, FL 33166
4) X Change ___ Add ___ Remove	VP	Andrea M. Agha	Town of Miami Lakes 6601 Main Street Miami Lakes, FL 33014
5) ___ Change X Add ___ Remove	T	Ramiro Inguanzo	Bal Harbour Village 655 96 Street Bal Harbour, FL 33154
6) ___ Change X Add ___ Remove	S	Candido Sosa-Cruz	City of North Miami Beach 17050 NW 19 Avenue North Miami Beach, FL 33162

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

N/A

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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   7\11\17

Signature _____Rafael Casal_____

(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)

_____TOWN MANAGER_____
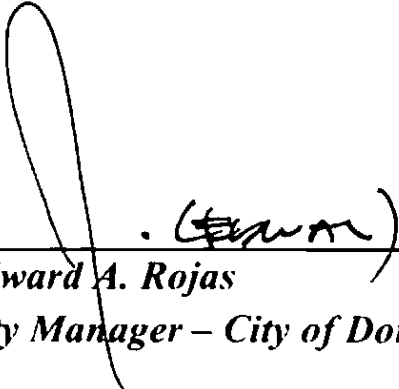
(Title of person signing)

MDCCMA

OATH OF OFFICE

MIAMI-DADE CITY AND COUNTY MANAGEMENT ASSOCIATION

I, ***Edward A. Rojas***, do solemnly swear that I will support the Council/Manager form of Government; that I will, in all aspects, observe the provisions of the by-laws of the Miami-Dade City and County Management Association, and will faithfully discharge the duties of the office of the PRESIDENT.

So help me God!

_____
Edward A. Rojas
City Manager – City of Doral

Sworn and subscribed on this 16th day of June, 2017.

MDCCMA

OATH OF OFFICE

MIAMI-DADE CITY AND COUNTY MANAGEMENT ASSOCIATION

I, *Andrea M. Agha*, do solemnly swear that I will support the Council/Manager form of Government; that I will, in all aspects, observe the provisions of the by-laws of the Miami-Dade City and County Management Association, and will faithfully discharge the duties of the office of the VICE-PRESIDENT.

So help me God!

Andrea M. Agha
Assistant Town Manager – Town of Miami Lakes

Sworn and subscribed on this 16th day of June, 2017.

MDCCMA

OATH OF OFFICE

MIAMI-DADE CITY AND COUNTY MANAGEMENT ASSOCIATION

I, **_Ramiro Inguanzo_**, do solemnly swear that I will support the Council/Manager form of Government; that I will, in all aspects, observe the provisions of the by-laws of the Miami-Dade City and County Management Association, and will faithfully discharge the duties of the office of the TREASURER.

So help me God!

Ramiro Inguanzo
Assistant Village Manager –
Bal Harbour Village
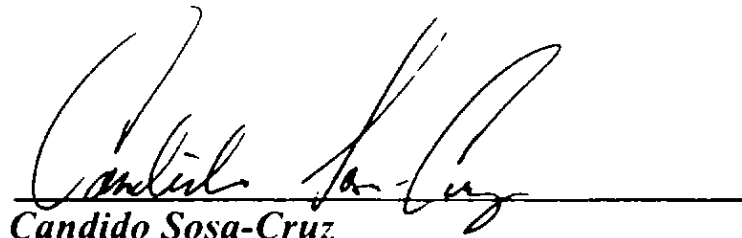
Sworn and subscribed on this 16th day of June, 2017.

MDCCMA

OATH OF OFFICE

MIAMI-DADE CITY AND COUNTY MANAGEMENT ASSOCIATION

I, **Candido Sosa-Cruz**, do solemnly swear that I will support the Council/Manager form of Government; that I will, in all aspects, observe the provisions of the by-laws of the Miami-Dade City and County Management Association, and will faithfully discharge the duties of the office of the SECRETARY.

So help me God!

Candido Sosa-Cruz
Deputy City Manager – City of North Miami Beach

Sworn and subscribed on this 16th day of June, 2017.