

N14 00000 7372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

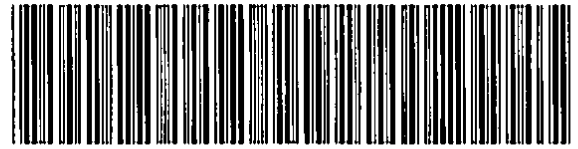
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200329374742

05/20/19--01001--003 **35.00

2019 JUN 20 PM 1:56

Amend

JUN 22 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTH MIAMI PLAZA Resident Council

DOCUMENT NUMBER: NM4000007372 JNC

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

Please return all correspondence concerning this matter to the following:

(Name of Contact Person)

(Firm/ Company)

(Address)

(City, State and Zip Code)

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

For further information concerning this matter, please call:

_____ 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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2019

NESTOR G. SALING
6701 SW 62ND AVE
APT. 412
SOUTH MIAMI, FL 33143

SUBJECT: SOUTH MIAMI PLAZA RESIDENT COUNCIL, INC.
Ref. Number: N14000007372

We have received your document for SOUTH MIAMI PLAZA RESIDENT COUNCIL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please check only 1(one) action regarding the officer/directors.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 519A00011359

RECEIVED
2019 JUN 20 PM 11:04
STATE OF FLORIDA
TALLAHASSEE, FL

SOUTH MIAMI PLAZA ^{of} Resident Council INC

N14000007372

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, ST as an Add.

Example:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input type="checkbox"/> Remove	V	Mike Jones
<input type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
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- 1) ☐ Change T GLADYS MARTINEZ 6701 SW 62ND AVE.
☒ Add #113
☐ Remove SOUTH MIAMI, FL 33143
- 2) ☐ Change T ALVARO MUÑOZ 6701 SW 62ND AVE.
☐ Add #112
☒ Remove SOUTH MIAMI, FL 33143
- 3) ☐ Change _____
☐ Add _____
☐ Remove _____
- 4) ☐ Change _____
☐ Add _____
☐ Remove _____
- 5) ☐ Change _____
☐ Add _____
☐ Remove _____
- 6) ☐ Change _____
☐ Add _____
☐ Remove _____

• *Additional sheets, if necessary.* (Be specific)

[illegible]

The date of each amendment(s) adoption: JUNE 14, 2019, if other than the date the document was signed.

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

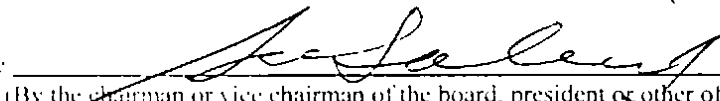
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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) 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 JUNE 14, 2019

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)

NESTOR G. SALING
(Typed or printed name of person signing)

President
(Title of person signing)