

N 140000011699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

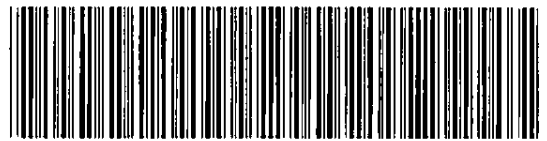
(Document Number)

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Special Instructions to Filing Officer:

check adopt.
of amend. box

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2024

MATTHEW MARANGES, ESQ
8000 SW 117 AVENUE, SUITE 206
MIAMI, FL 33183

SUBJECT: 2399 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N14000011699

We have received your document for 2399 COLLINS AVENUE CONDOMINIUM ASSOCIATION, 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):

Please check one of the adoption of amendment boxes.

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.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 124A00011207

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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 2399 Collins Avenue Condominium Association Inc.

DOCUMENT NUMBER: N14000011699

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

Please return all correspondence concerning this matter to the following:

Matthew Maranges, Esq.

(Name of Contact Person)

Peterson Baldor & Maranges PLLC

(Firm/ Company)

8000 SW 117 Avenue, Suite 206

(Address)

Miami, Florida 33183

(City/ State and Zip Code)

matt@pbmlegal.net

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

For further information concerning this matter, please call:

Matthew Maranges, Esq.

305

270-3773

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 &
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL

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Articles of Amendment
to
Articles of Incorporation
of

2399 Collins Avenue Condominium Association Inc.

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

N14000011699

(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:

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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

(Florida street address)

New Registered Office Address:

(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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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, P'T as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	P	John P. Bostany	102 24 Street, Unit 1116 Miami Beach, FL 33139
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	S	Michael Rock	600 Brickell Ave, Suite 1720 Miami, FL 33131
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Cristina Mattin	102 24 Street, PH-1621 Miami Beach, FL 33139
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Julie LeClair	102 24 Street Unit 1721 Miami Beach, FL 33139
<input checked="" type="checkbox"/> Remove			
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	P	Gennadiy Gurevich	102 24 Street Unit 1020 Miami Beach, FL 33139
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	T	Haim Koren	511 NW 108 Avenue Plantation, FL 33324
<input type="checkbox"/> Remove			

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

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

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Additional Officers and Directors:

<u>Type of Action</u>	<u>Title</u>	<u>Name</u>	<u>Address</u>
7) <u>X</u> Add	<u>S</u>	Jill Lankler	<u>102 24 Street, Unit 1104</u> <u>Miami Beach, FL 33139</u>
8) <u>X</u> Add	<u>VP</u>	Michael Lombardi	<u>1862 Oak Tree Road</u> <u>Edison, NJ 08820</u>
9) <u>X</u> Add	<u>D</u>	Carl Mollison	<u>102 24 Street, Unit 1108</u> <u>Miami Beach, FL 33139</u>

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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 4/30/2024

Signature Gennadiy Gurevich
(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)

Gennadiy Gurevich

(Typed or printed name of person signing)

President

(Title of person signing)

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