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(Business Entity Name)
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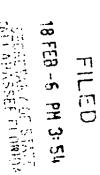




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Amend

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	OMMERCIAL CON		MIV ASSOCIATIO	ON, INC.
N14349 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub				
Please return all correspondence concerning this matt	ter to the following:			
ELISABETH ILLG-REYES				
	(Name of Contact F	Person)		
MARINA LAKE COMMERCIAL CONDOMINIUM	IV ASSOCIATIO	N, INC.		
	(Firm/ Compar	ny)		
1550 MADRUGA AVE., SUITE 250				
	(Address)		<u></u> -	
CORAL GABLES, FL 33146-3017				
	(City/ State and Zip	Code)		
eillgreyes@ro-arch.com				
E-mail address: (to be use	d for future annual re	port notifica	ation)	
For further information concerning this matter, please	e call:			
ELISABETH ILLG-REYES	а	305 .t	793-1315	
(Name of Contact Person			de) (Daytime Te	lephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida	Department	of State:	
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & Certificate of Status}	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Co	52.50 Filing Fee ertificate of Status ertified Copy additional Copy is nelosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Addre mendment S vivision of C lifton Buildi	Section orporations	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARINA LAKE COMMERCIAL CONDOMINIUM IV ASSOCI. ATION, INC.

(Name of Corporation as c	urrently filed with the Florida	Dept. of State)
N14349		
(Document	Number of Corporation (if know	m)
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	erporation" or "incorporated" o	or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
		1963 00
		## B T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	1	一
(Manning data) cs. Manning data cs. Mann		79 2
		<u> </u>
D. If amending the registered agent and/or registere	d office address in Florida, en	ter the name of the
new registered agent and/or the new registered o		
Name of New Registered Agent:		
——————————————————————————————————————	(Floria	la street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis		
hereby accept the appointment as registered agent. I	am familiar with and accept the	obligations of the position.
	Character CN D 1	. I to use if along the
	Signature of New Registere	a Agent, ij 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: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>nes</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
1) Change	D	_	ALLEGUEZ, ANA		7294 SW 48 ST	
Add					MIAMI, FL 33155	
X Remove						
2) Change	D		TAPANES, RAFAEL		7296 SW 48 ST	
Add				,	MIAMI, FL 33155	
X Remove						
3) Change		_			- · · · · · -	
Add						
Remove						
4) Change		_				
Add					·	
Remove						
5) Change		_				
Add						
Remove						
6) Change		_		.		
Add						
Remove						

amending or adding additional Artitach, additional sheets, if necessary).	(Be specific)			
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	date of each amen this document was:	• •	, if other than the
Effe	ective date if applic	able:	
		(no more than 90 days after amendment file date)	
		d in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	e listed as the
Adoption of Amendment(s)		nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
	There are no membadopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
	Dated	01/31/2018	
	Signature	Hisgisell Dg. Bes	_
	(By the chairman or vice chairman of the board président 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)	
		ELISABETH ILLG-REYES	
		(Typed or printed name of person signing)	
		SECRETARY / TREASURER / DIRECTOR	
		(Title of person signing)	