

N16000002370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

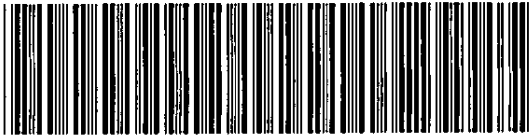
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2017 MAY 15 PM 3:37

V HERRING  
MAY 18 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 9, 2017

LUCIANO ISLA, ESQ.  
6625 MIAMI LAKES DR. EAST  
SUITE 424  
MIAMI LAKES, FL 33014

SUBJECT: CORNER VIEW TOWNHOMES AT EASTERN SHORES  
CONDOMINIUM NO. 2 ASSOCIATION, INC.  
Ref. Number: N16000002370

We have received your document for CORNER VIEW TOWNHOMES AT EASTERN SHORES CONDOMINIUM NO. 2 ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Valerie Herring  
Regulatory Specialist II

Letter Number: 017A00004517

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Corner View Townhomes @ Eastern Shores  
Condominium Association No. 2

DOCUMENT NUMBER: N16000002370

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

Please return all correspondence concerning this matter to the following:

Fausto Alvarez

(Name of Contact Person)

(Firm/ Company)

2828 SW 22<sup>nd</sup> Street, Suite 4.00, 5<sup>th</sup> Floor

(Address)

Miami, FL 33145

(City/ State and Zip Code)

fausto@bellsouth.net

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

For further information concerning this matter, please call:

Cecilia Ynterian

(Name of Contact Person)

at 305 592-4855

(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 & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$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

RECEIVED

17 MAY 15 AM 9:21

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation

Coenue View Townhomes at Eastern Shores Condominium Association, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State) No. 2

N1600000 2370

(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)

2828 SW 22<sup>nd</sup> Street, Suite 400  
5<sup>th</sup> Floor, Miami, FL 33145

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

(Mailing address MAY BE A POST OFFICE BOX)

2828 SW 22<sup>nd</sup> Street, Suite 100  
5<sup>th</sup> Floor, Miami, FL 33145

**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:

Fausto Alvarez

2828 SW 22<sup>nd</sup> Street, Suite 400, 4<sup>th</sup> Fl.

(Florida street address)

New Registered Office Address:

Miami

(City)

Florida

(Zip Code)

33145

**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.*

Fausto Alvarez

Signature of New Registered Agent, if changing

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DIVISION OF CORPORATIONS

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	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<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 <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PSTD</u>	<u>Nigdalia Ferrer</u>	<u>6625 Miami Lakes Dr. E</u> <u>#424</u> <u>Miami Lakes, FL 33014</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Luciano Isla</u>	<u>6625 Miami Lakes Dr. E.</u> <u>#424</u> <u>Miami Lakes, FL 33014</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Vivian Rey</u>	<u>6625 Miami Lakes, Dr. E</u> <u>#424</u> <u>Miami Lakes, FL 33014</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Pres.</u>	<u>Cecilia Ynterian</u>	<u>P.O. Box 630844</u> <u>Miami, FL 33163</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S.</u>	<u>Nozal Zardivia</u>	<u>20740 NE 31 Place</u> <u>Aventura, FL 33180</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Vladimir Guro</u>	<u>1210 Lukas Blvd.</u> <u>Moeganville, NJ 07751</u>

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

All other matters remain the same.

FEE # 81-1790736

The date of each amendment(s) adoption: February 16, 2017, if other than the date this document was signed.

Effective date if applicable: February 16, 2017  
(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 2/16/17

Signature Migdalia Ferrer

(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)

Migdalia Ferrer  
(Typed or printed name of person signing)

President  
(Title of person signing)