N17000 001 025

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



200331968802

07/25/19--01016--020 **35.00

FILED

19 AUG 22 PH 1: 23

SECRETARY PERSONS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	PONCE DE LOEN T	OWNHOMES CONDO	MINIUM ASSOCIATION INC	
DOCUMENT NUMBER:	N17000001025			
The enclosed Articles of An	nendment and fee are subn	nitted for filing.		
Please return all corresponde	ence concerning this matte	r to the following:		
IBRAHIM GULDIKEN				
	····	(Name of Contact Person	n) .	
		(Firm/ Company)		
		(rimi Company)		
3446 SW 23RD ST				
		(Address)		
MIAMI, FL 33145				
		(City/ State and Zip Cod	c)	
GULDIKEN2008@GMAII	СОМ			
I	-mail address: (to be used	for future annual report	notification)	
For further information cond	erning this matter, please	call:		
IBRAHIM GULDIKEN		at		
	(Name of Contact Person)	(A)	rea Code) (Daytime Telephone Nur	nber)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida Depa	artment 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

Articles of Amendment

to Articles of Incorporation

of

PONCE DE LOEN TOWNHOMES CONDOMINIUM ASSOCIATION INC

n as curren	tly filed with t	he Florida Dept	of State)		
					•
ument Numb	er of Corporation	on (if known)			
orida Statute	s, this <i>Florida</i> .	Not For Profit C	Corporation ac	lopts the fo	llowing
he corporati	<u>on:</u>				
	·			Ti	he new
rd "corporat <u>ne</u> .	ion" or "incorp	porated" or the a	bbreviation (Corp." or	"Inc."
able:	3446 SW 23R	D ST MIAMI, FI	L 33145		
ADDRESS)					
<u>BOX</u>)	3446 SW 23R)	D ST MIAMI, FI	L 33145		
•				<u>:</u> -1	
					19
					- 2
red office ad	<u>address in Flo</u> dress:	orida, enter the	name of the	SS A	22
IBRAHIM GULDIKEN				PH	
3446 SW 2	3 ST			- ES	
	<u> </u>	(Florida street a	ddress)	:5m	ယ်
MIAMI			Florida 3	3146	
	(City)			de)	
Registered A	gent:				
t. I am fami	liar with and a	ccept the obligati	ions of the pos	sition.	
1					
Sim	nature of New A	Pagistarad Acces	if ahur-in		
	ament Numb orida Statute ne corporati ne. able: ADDRESS) Stered office ed office ad IBRAHIM 3446 SW 2 MIAMI Registered A I am fami	ament Number of Corporation orida Statutes, this Florida orida ori	ament Number of Corporation (if known) orida Statutes, this Florida Not For Profit Corporation: """ """ """ """ """ """ """ """ """	ament Number of Corporation (if known) orida Statutes, this Florida Not For Profit Corporation act or corporation: or "corporation" or "incorporated" or the abbreviation of the able: able: 3446 SW 23RD ST MIAMI, FL 33145 ADDRESS) 3446 SW 23RD ST MIAMI, FL 33145 BOX) 3446 SW 23RD ST MIAMI, FL 33145 BOX 3446 SW 23RD ST MIAMI, FL 33145 (Florida street address) MIAMI (City) (Florida street address) MIAMI (City) (Florida Street address)	ament Number of Corporation (if known) orida Statutes, this Florida Not For Profit Corporation adopts the form the corporation: The corporation: The discorporation or "incorporated" or the abbreviation "Corp." or the able: 3446 SW 23RD ST MIAMI, FL 33145 ADDRESS) BOX) 3446 SW 23RD ST MIAMI, FL 33145 BOX 3446 SW 23RD ST MIAMI, FL 33145 BOX Gradies address in Florida, enter the name of the red office address: 1BRAHIM GULDIKEN 3446 SW 23 ST (Florida street address) MIAMI (City) (City) Registered Agent: 1. I am familiar with and accept the obligations of the position.

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>V</u> <u>M</u>	<u>hn Doe</u> ike Jones Illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	РТ	FLORENCIA YAGODNIK	90 SE 3RD ST
Add			SUITE CU5
X Remove			MIAMI, FL 33130
2) Change	РТ	HUMBERTO O RINALDI	90 SE 3RD ST
Add			SUITE CU5
X Remove			MIAMI, FL 33130
3) Change	PT	IBRAHIM GULDIKEN	3446 SW 23RD ST
X Add			MIAMI, FL 33145
Remove			### UG 22
4) Change	v	. ADRIAN SIERRA	3448 SW 23RD ST 💢 🎅 🛐
X Add			MIAMI, FL 33145
Remove			<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
		
		····
		33 cm
		-: 9
		<u> </u>
· · · · · · · · · · · · · · · · · · ·		
		<u> </u>
		IAIC OAICA
		-
	· · · · · · · · · · · · · · · · · · ·	

	e date of each amendment(s) adoption:e this document was signed.	, if other than t
	fective date if applicable:	
	(no more than 90 days after amendment file date)	·
Not doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not current's effective date on the Department of State's records.	be listed as the
Ad	option 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 8/7/19	
	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)	
	Ibrahim aldikes	
	(Typed or printed name of person signing)	19 #
	Ibrahim Guldiken Pressident (Title of person signing)	AUG 2
		2 PH
		D
	<u> </u>	ည်