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(((H180003003143)))



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COR AMND/RESTATE/CORRECT OR O/D RESIGN X AT THE GROVE CONDOMINIUM ASSOCIATION BUILDING 2,

Certificate of Status	0
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OCT 22 2018

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October 18, 2018

FLORIDA DEPARTMENT OF STATE

LUX AT THE GROVE CONDOMINIUM ASSOCIATION BUILDING 2, IN 3059-3067 CARTER STREET COCOANUT GROVE, FL 33133

SUBJECT: LUX AT THE GROVE CONDOMINIUM ASSOCIATION BUILDING 2, INC.

REF: N17000006336

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Shelia H Young Regulatory Specialist II

FAX Aud. #: H18000300314 Letter Number: 618A00021254 Articles of Amendment to
Articles of Incorporation of

		Arucies of Inc			
LUX AT THE GROVE	CONDOMINIUM ASSOC				
	(Name of Corporation			ida Dept. of State)	
N17000006336					
	(Docum	ent Number of C	orporation (if ki	nown)	
Pursuant to the provision amendment(s) to its Artic	s of section 617,1006, Flori les of Incorporation:	ida Statutes, this ,	Florida Not Fo	r Profit Corporation ado	pts the following
A. If amending name, c	nter the new name of the	corporation:			
name must be distinguish	able and contain the word	"corporation" or	· "incorporated	or the abbreviation "C	The net
Company or "Co." ma	y not be used in the name.		ŕ		vip. or mic.
B. Enter new principal (Principal office address	office address, if applicab MUST BE A STREET AD	de: DDRESS)			
					∑ ∺ .ō
C. Enter new mailing a	ddress, if applicable:				
(Mailing address <u>MA</u>	Y BE A POST OFFICE B	<u>ox</u>)			¥
•					7
D. If amending the regis	tered agent and/or registe and/or the new registered	ered office addre d office address:	ess in Florida, e	enter the name of the	LORIDA
<u>Name o</u> j	New Registered Agent				
	_		·		
New Re	gistered Office Address:		(Flor	rido sireei address)	
		··-·		, Florida	
		(Ciry)		(Zip Code	٤)
New Registered Agent's hereby accept the appoint	Signature, if changing Resturent as registered agent.	gistered Agent: I am familiar wi	th and accept th	ne obligations of the posit	tlon.
				· · · · ·	
		Signature	of New Register	red Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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; <u>X</u> Change X Remove X Add		<u>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	MGR	JCIS HOLDINGS LLC	2423 SW 147 AVENUE #179
Add			MIAMI, FL 33185
X Remove			
2) Change	MGR	ICM CARTER STREET LLC	2423 SW 147 AVENUE #179
× Add			MIAMI, FL 33185
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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(attach a	dditional sho	ng additional Arti	cles, enter change(s) t (Be specific)	ere:		
(30,000)		sis, if necessary).	(be specific)		!	
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The date of each amen	ment(s) adoption	
late this document was	gned.	, if other than the
effective date <u>if applic</u>	10/16/2018 hble:	
	(no more than 90 days after amendmen! fi	ile date)
iote: If the date inserte ocument's effective da	d in this block does not meet the applicable statutory filing re on the Department of State's records.	equirements, this date will not be listed as the
doption of Amendme	t(s) (CHECK ONE)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes of for approval.	ast for the amendment(s)
There are no memb adopted by the bos	ers or members entitled to vote on the amendment(s). The ar	mendment(s) was/were
Dated	10/16/2018	
Signature	Quan Carlos Sainz	
	By the chairman or vice chairman of the board, president or of the new selected, by an incorporator — if in the hands of the court appointed fiduciary by that fiduciary)	ther officer-if directors fa receiver, trustee, or
	Juan Carlos Sainz	
	(Typed or printed name of person	signing)
	ST	
	(Title of person signing	<u>, </u>

LAZARUS CORPORATE

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