## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SOLOMON & FURSHMAN, LLP

Account Number : I20050000182 Phone : (305)861-8034 Fax Number : (305)861-8012

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## COR AMND/RESTATE/CORRECT OR O/D RESIGN APEX AT PARK CENTRAL CONDOMINIUM NO. 3 ASSOCIATION.

Certificate of Status	0
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Corporate Filing Menu

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SEP 2 3 2019

## Articles of Amendment to Articles of Incorporation of

2019 SEP 20 PM 1: 26

APEX AT PARK CENTRAL CONDOMINIUM NO. 3 A		
(Name of Corporation as curr	ently filed with the Flori	da Dept. of State)
N19000000244		
(Document Nur	nber of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	The new
name must be distinguishable and contain the word "corpo	ration" or "incorporated	or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	1	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	N/A	
	1	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
	<u></u>	
D. If amending the registered agent and/or registered o		enter the name of the
new registered agent and/or the new registered offic	e nddress:	
Name of New Registered Agent:	J / A	
	art and a second	
New Registered Office Address:	{F10	orida street address)
		eta 11.
·	(City)	, Florida (Zip Code)
	. •.	(2.7 00.2)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		the obligations of the position
т петелу шегері іне аррынітелі as regisierea ageni. Тат	јатнаг wun ака ассерt .	те вондиноть ој те разшот.
<del></del>	Signature of Man Pariet	and Asset if abanding

From: 3058618012

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	V Mik	<u>n Doc</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	TERESA BALUJA	730 NW 107TH AVE
Add			SUITE 300
X Remove			MIAMI, FLORIDA 33172
2) X Change	PD .	CARMEN OROZCO	730 NW 107TH AVE
Add	<del></del>		SUITE 300
Remove			MIAMI, FLORIDA 33172
3) X Change	STD	RAISA KRAUSE	730 NW 107TH AVE
Add			SUITE 300
Remove			MIAMI, FLORIDA 33172
4) Change	VD	VANESSA PEREZ	730 NW 107TH AVE
X Add			SUITE 300
Remove			MIAMI, FLORIDA 33172
5) Change	<u></u>		<del></del>
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

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

To: FAX SERVICE

From: 3058618012

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	date of each amendment(s) adoption: N/A this document was signed.	, if other than the
Effe	tive date if applicable:  (no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n ment's effective date on the Department of State's records.	ot be listed as the
Ada	ption 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 September 5, 2019	
	Signature COMMUN	
	(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)	
	Carmen Orozco	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	