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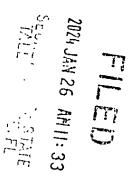
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TO: Amendment Section Division of Corporations

me Condominium Assoc	iation. Inc		
nitted for filing.			
er to the following:			
(Name of Contact Persor	1)		
(Firm/Company)			
(Tittle Company)			
(Address)			
(City/ State and Zip Cod	e)		
for future annual report	notification	n)	
call:			
	-	564-1830	
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	(Name of Contact Person (Firm/ Company) (Address) (City/ State and Zip Cod for future annual report call: 1 78 2 at (At yable to the Florida Dept S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	(Name of Contact Person) (Firm/ Company) (Address) (City/ State and Zip Code) for future annual report notification call: 1 786 1 (Area Code) yable to the Florida Department of Certified Copy Certification (Additional copy is certifienclosed) (Address)	(Name of Contact Person) (Firm/ Company) (Address) (City/ State and Zip Code) Tor future annual report notification) call: at 786 564-1830 (Area Code) (Daytime Telephone Number) yable to the Florida Department of State: S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

les of Incorporation of FILED

Villa Emma Townhome Condominium Associatio	on, Inc.			2021	
Name of Corporation as currently filed with the	e Florida D	ept. of State)		2024 JAN 26 S=	AH II.
N19000010496				SEUNE	
(Docum	nent Numbe	r of Corporation (if knov	vn)	To L.	374
fursuant to the provisions of section 617,1006. Flor mendment(s) to its Articles of Incorporation:	rida Statute:	s, this <i>Florida Not For F</i>	Profit Corpo	ration adopts the fo	ollowing
a. If amending name, enter the new name of the	e corporati	on:			
N/A				:	The new
ame must be distinguishable and contain the word Company" or "Co." may not be used in the name		ion" or "incorporated" o	or the abbre		
3. Enter new principal office address, if applica	ıble:	N/A			
Principal office address MUST BE A STREET A					
					
	-				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	N/A			
O. If amending the registered agent and/or registered registered agent and/or the new register			iter the nam	ne of the	
Name of New Registered Agent:	N/A				-
		···			
New Registered Office Address:		(Florid	da street addres	(s)	
	N/A			131	
		(City)		, Florida <u> </u>	
		The service of the se		(124)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			, ahlimeian	of the position	
петену ассерь те арротитет аз гедімегеа адеп	a rumjun	инас жин ини ассері ін	; oniginons	ој те ромион.	
-	Çi,	matura of Naw Rogistors	od toom ite	hzmaina	
-	Sig	mature of New Registere	ed Agent, if c	hanging	

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	PT John Do V Mike Jo SV Sally Si	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D,P,S	Adrian Alfonso	8475 SW 103 Street Miami, FL 33156
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add	<u> </u>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
		· · · · · · · · · · · · · · · · · · ·	
	 		

		-
		
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The date of each amendment(s) adoption: date this document was signed.		_, it other than the
Effective date if applicable:	o more than 90 days after amendment file date)	
me	more than so tags after amenament fite tate)	
Note: If the date inserted in this block does r document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	oe listed as the
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

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 1-20- 2024
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)
Adrian Allanso
(Typed or printed name of person signing)
Director
(Title of person signing)