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## COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: HAMLIN IND	USTRIAL PLAZA CON	DOMINIUM ASSOCIATION INC
DOCUMENT NUMBER: N20000007199		
The enclosed Articles of Amendment and fee are		
Please return all correspondence concerning this	matter to the following:	
Luis Daniel Llorens		
	(Name of Contact P	erson)
Hamlin Industrial Pfaza Condominium Associat	ion Inc.	
	(Firm/ Compan	y)
1125 Ginger Circle		
	(Address)	
Florida 33326		
	(City/ State and Zip	Code)
Horens@ggparts.com		
E-mail address: (to be	used for future annual rep	port notification)
For further information concerning this matter, pl	lease call;	
Luis Daniel Llorens	at	305-778-163¢
(Name of Contact Pe	erson)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida l	Department of State:
■ \$35 Filing Fee □ □\$43.75 Filing Fee Certificate of Stat	tus	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div	rect Address nendment Section vision of Corporations c Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, Ft. 32303

## Articles of Amendment to Articles of Incorporation of

HAMLIN INDUSTRIAL PLAZA CONDOMINIUM ASSOCIATION INC

(Name of Corporation as currently filed with the Flo	orida Dept. of State)		
N20000007199	·		
(Document)	Number of Corporation (if kno	own)	
Pursuant to the provisions of section 617,4006. Florida 5 amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not For</i>	Profit Corporation adopts	the following
A. If amending name, enter the new name of the cor	poration <u>:</u>		
name must be distinguishable and contain the word "co." "Company" or "Co." may not be used in the name.	rporation" or "incorporated"	or the abbreviation "Corp	The new o." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PECC )		<del></del>
Trincipal office dathess <u>Steat BL/2 STREET 31178</u>	<u>(E.3.3</u> )	· · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	)		
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, c ffice address:	enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	(I loi	ada street address)	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis	tered Agent:		
I hereby accept the appointment as registered agent. To	am familiar with and accept th	he obligations of the position	<i>'111</i>
			<b>.</b> . 9
	Signature of New Register	ed Agent, if changing	21 JUL 16
			16
			<u>)</u>
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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 = ChiefExecutive 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 Doc 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 De           V         Mike Jo           SV         Sally Si	<u>mes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	Mariano Domingues	6700 Indian Creek Dr., Apt. 602 Miami Beach, FL 33141
<ul> <li>X Remove</li> <li>2) Change Add</li> </ul>	<u>T</u>	Pedro Paulo Tosca	115 Sunrise Dr., Apt. 2D Key Biscayne, FL 33149
X			
4) Change Add			
Remove 5)ChangeAdd			
Remove 6)ChangeAdd			
Remove			
E. If amending or addin (attach additional shee		cles, euter change(s) here: (Be specific)	

·		
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The date of each amendment(s) ad date this document was signed	option:	, if other than the
may .		
Effective date if applicable:	(no more than 90 days after amendment file date)	· <del></del>
	tho more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this bloodocument's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not boartment of State's records.	e listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) L.	

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 $\frac{7/8/21}{}$
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 fiductory by that fiduciary)
Luis Daniel Llorens
(Typed or printed name of person signing)
Vice President
(Title of person signing)