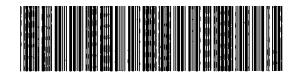
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(Req	uestor's Name	)
(Add	ress)	· · · · · · · · · · · · · · · · · · ·
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Certified Copies	Certificate	es of Status
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DIVISION OF COMPORATIONS
DIVISION OF 27 PH 3: 50

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: POLO PARK	APARTMENTS COND	OMINIUM ASSOC
DOCUMENT NUM	BER: N94000004225		
The enclosed Article	s of Amendment and fee are sul	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
·	GAE	BE GARCIA	
	(Name of	Contact Person)	
	LE SOLEIL M	MANAGEMENT, LLC	
	(Firn	n/ Company)	
	1850 SW 8 ST	REET, SUITE 208D	
<del></del>	(,	Address)	
	MIAMI, F	LORIDA 33135	
<del></del>	(City/ Sta	te and Zip Code)	<del></del>
	E-mail address: (to be use	MANAGEMENT.COM and for future annual report notif	ication)
For further information	on concerning this matter, pleas	e call:	
GABE GARCIA		at ( <u>305</u> ) <u>865-40</u> (Area Code & Day	)70 X212
(Name	of Contact Person)	(Area Code & Day	time Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departme	ent of State:
	☐ \$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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 mssee, FL 32314	Street Address Amendment Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ON SECRETARY OF STATE
OP OCT 27 PM 3: 50

#### Articles of Amendment to Articles of Incorporation of

### POLO PARK APARTMENTS CONDOMINIUM ASSOCIATION, 100.

(Name of Corporation as currently filed w	vith the Florida Dept. of S	tate)
N940000042	225	
(Document Number of Corp	poration (if known)	
Pursuant to the provisions of section 617.1006, Florida Stat the following amendment(s) to its Articles of Incorporation	tutes, this Florida Not For	Profit Corporation adopts
A. If amending name, enter the new name of the corpor	ration:	
The new name must be distinguishable and contain the wah abbreviation "Corp." or "Inc." "Company" or "Co." may		corporated" or the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		nter the name of the
Name of New Registered Agent:	<u> </u>	
New Registered Office Address: (I	Florida street address)	<del></del>
<del></del>	(City)	, Florida
New Registered Agent's Signature, if changing Registered liberary accept the appointment as registered agent. I position.	ed Agent:	, , ,

Signature of New Registered Agent, if changing

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
ST	SCHWARTZ, SHOSHANA	P.O. BOX 190901 MIAMI BEACH, FLORIDA 33119	☐ Add ☑ Remove
ST	SPEAL, SHOSHANA S.	P.O. BOX 352466 MIAMI, FLORIDA 33135	☑ Add □ Remove
<del></del>			☐ Add ☐ Remove
E. <u>If amend</u> (attach ad	ing or adding additional Articles, enter ditional sheets, if necessary). (Be spec	er change(s) here: vific)	

The date of each amendment(s):	adoption: OCTOBER 15, 2009
.,	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or men adopted by the board of directors	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated OCTOE	BER 15, 2009
Signature	
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator — if in the hands of a receiver, trustee, of ourt appointed fiduciary by that fiduciary)
	SETH WASSERMAN
_	(Typed or printed name of person signing)
_	PRESIDENT
_	(Title of person signing)