N94000004845

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		;

Office Use Only



900273744889

900273744869 06/03/15--01035--016 **35.00

FILED
15 JUN 29 PM 5: 23
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Amnd.

JUL - 1 2015

D.CONNELL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Art Deco Condominion Association, inc.
DOCUMENT NUMBER: 1094000004845
DOGENIE TO TO TO
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Philippe domercy (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
429 denox Ave. Ste4004
(Address)
Uicmi Beach, Fl 33139
(City/ State and Zip Code)
L-mail address: (to be used for future annual report notification)
E-man address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Philippe domesu at 305 749 7500 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Art Deco Condominium Association	on inc	
(Name of Corporation as cur	rently filed with the Florid	a Dept. of State)
D94000004845		
(Document No	umber of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corp	oration" or "incorporated"	
"Company" or "Co." may not be used in the name.		•
B. Enter new principal office address, if applicable:		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
(Principal office address MUST BE A STREET ADDRE	<u>(33</u>)	
		2 T
	·	- SA B
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	3 23
D. If amending the registered agent and/or registered		nter the name of the
new registered agent and/or the new registered offi	ce address:	
Name of New Registered Agent:		
	(Flor	ida street address)
New Registered Office Address:		
<u> </u>		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	red Agent:	
I hereby accept the appointment as registered agent. I am	m familiar with and accept th	e obligations of the position.

	Signature of New Register	ed 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)

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 I V Mike SV Sally		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>Trecours</u>	Ugurizio Battifora	610 8th st #104 Uiami beach, Fl. 33139
2) Change Add Remove	Teveral	Fabio Llocoloni	610 8th # 104 Uiani Beach, F1 33139
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Arti- utach additional sheets, if necessary).	(Be specific)
<u> </u>	
·	

DocuSign Envelope ID: ACF35F1E-7A69-4029-AB9D-03D8637FF6C0

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated 6/23/2015	·	
— DocuSigned b	y:	
Signature 6	Alexander -	
	faffor vice chairman of the board, president or other officer-if directors is selected, by an incorporator — if in the hands of a receiver, trustee, or	
	opointed fiduciary by that fiduciary)	
	Benedetto Costanza	
,	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	