# N97000001674

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AOND AND ORGI		MASIC	R ASSOCIATION, INC
N97000001674 DOCUMENT NUMBER:			· -	
The enclosed Articles of Amendment and fee	are submitted for fi	ling.		
Please return all correspondence concerning th	is matter to the foll	owing:		
LEGNE LIMA				
	(Name of C	Contact Person	)	· -
BLUE DIAMOND AND GREEN DIAMONE	MASTER ASSO	CIATION, INC		
	(Firm/	Company)		<del></del>
4777 COLLINS AVENUE				
	(A)	idress)		
MIAMI BEACH, FL 33140				
	(City/ State	and Zip Code	)	
LLIMA@BLUEGREENDIAMOND.NET				
E-mail address: (to	be used for future a	innual report n	otification	n)
For further information concerning this matter.	, please call:			
LEGNE LIMA		305		672-4779 EXT 1
(Name of Contact	Person)	at (Are	a Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount r	nade payable to the	Florida Depa	rtment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$	Status Certified	Copy al copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

#### Mailing Address

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

Street Address
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 of

BLUE DIAMOND AND GREEN DIAMOND MASTER ASSOCIATION, INC

(Name of Corporation as currently filed with the Florid	a Dept. of State)
N97000001674	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Stat amendment(s) to its Articles of Incorporation:	autes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRES</u>	
	utrc 23
C. Enter new mailing address, if applicable:	23
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<u></u>
	- <del></del>
	.∾
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered office	e address:
Name of New Registered Agent: N/A	
<u> </u>	
New Registered Office Address:	(Florida street address)
	, Florida
	(Eig) (Eig)
New Registered Agent's Signature, if changing Registere	
I hereby accept the appointment as registered agent. I am	jamutar wan ana accept the obugations of the position.
	Signature of New Registered Agent, if changing
	and the state of t

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	T	ANDREW KANE	4779 COLLINS AVENUE MIAMI BEACH, FL 33140
x Remove			
2) Change Add	<u>T</u>	JACK SCHWARCZ	4779 COLLINS AVENUE MIAMI BEACH, FL 33140
Remove 3 ) Remove 4 Add 4 Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
		pnal Articles, enter change(s) here: essary). (Be specific)	
PLEASE CONFIRM TH	E OTHE	R TWO BOARD MEMBERS ARE ACTIVE AND C	CORRECT:
ALICIA CASANOVA- F	RESIDE	<u>NT</u>	
BARRY SKOLNICK - V	'P		
PHIL SIEBERT- SECRE	T <u>ARY</u>		
TOTAL OF 4 BOARD M	1EMBER	S, ONLY 2 EXCHANGED.	

Effective date if applicable: 12/16/2020 (no more than 90 days after amendment file date)	
The date of each amendment(s) adoption:  date this document was signed.	, if other than the
N	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

u	adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were aired of directors.
	Dated	12/16/2020
	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)
		PHIL SIEBERT
		(Typed or printed name of person signing)
		SECRETARY

(Title of person signing)