N97000006816

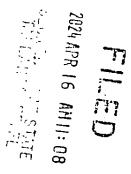
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

THE FOUNTAINV NAME OF CORPORATION:	IEW CLUB NO, IV. I	NC.	
N97000006816 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
P. TRISTAN BOURGOIGNIE			
	(Name of Contact Per	rson1	
THE FOUNTAINVIEW CLUB NO. IV, INC.			
	(Firm/ Company)	
925 PALERMO AVE, UNIT 1B			
	(Address)		
CORAL GABLES, FL 33134			
	(City/ State and Zip C	Code)	
PTB@MIAMI-0DROIT.COM			
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
P. TRISTAN BOURGOIGNIE	at	305	200 0350
(Name of Contact Person))	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida D	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) Filing Fee leate of Status and Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations	Am	eet Address endment Secti ision of Corpo	
P.O. Box 6327	The	: Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

FILED

THE FOUNTAINVIEW CLUB NO. IV, INC.			(== 5 ₁₁)
(Name of Corporation as currently filed with the	: Florida Dept. of State)	2024 APR 16	#M11-00
N97000006816		- · · · · · · · · · · · · · · · · · · ·	Ru 11: fi8
(Docum	nent Number of Corporation (if known)	1.1.	37.7E
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not For Profi</i>	(Corporation ado	pts the followin
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the word	"cornoration" or "incornorated" or th	e abbreviation "C	The new
"Company" or "Co." may not be used in the name		,	,
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
		<u>. </u>	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
D. If amending the registered agent and/or registered agent and/or the new registered.		the name of the	
Name of New Registered Agent:			
Charles of the Charle	2655 LEJEUNE RD, STE 700G		
	(Florida stre	ret address)	
<u>New Registered Office Address:</u>		_	
	CORAL GABLES,	, Florida	3134
	(City)	(Zip Cod	de)
New Registered Agent's Signature, if changing F	Registered Agent:		
I hereby accept the appointment as registered agen	t. I am familiar with and accept the obl	igations of the pos	rition.
	Signature of New Registered Ag		
	эіунаште од меж кеўіметса му	жи, у спануту –	

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; FR = 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 De V Mike Je SV Sally Sr	one <u>s</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>VP</u>	DANIEL RODRIGUEZ	925 PALERMO AVE, #2B CORAL GABLES, FL 33134
X Remove			
2) Change Add	VP, S	HELENE BOURGOIGNIE	925 PALERMO AVE, #1B CORAL GABLES, FL 33134
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

	
	
The date of each amendment(s) adoption: $\frac{03/29/2024}{}$, if date this document was signed.	other than th
Effective date if applicable: (no more than 90 days after amendment file date)	

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

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

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 04/02/2024
Signature (By the 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)
P. TRISTAN BOURGOIGNIE
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)