## P04000070667

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## COVER LETTER

O: Amendment Section Division of Corporations
DOCUMENT NUMBER:POTODOOTOGGT
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kristing and Management  Name of Contact Person  Gath Group Property Management  Firm/ Company  6900 Biscayne Blvd. Suite 80  Address  Miami, FL, 33139  City/ State and Zip Code  Kristing Other Contact Person  E-mail address: (to be used for future annual report application)
For further information concerning this matter, please call:
Knshm Leifer at 305 299 6490  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:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

M11 69, 111 C.			
(Name of Corporatio	n as currently filed with the l	lorida Dept. of State)	
P04000070661			<del></del>
, (Docum	ent Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	orporation adopts the following amend	dment(s) to
A. If amending name, enter the new name of the co	rporation:		
name must be distinguishable and contain the word "co." Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional co	TheThe	ъ., "
B. Enter new principal office address, if applicable:			_ 70
(Principal office address MUST BE A STREET ADD	PRESS )	•	2000
	<del></del>		- 1 4:-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<b>V</b> 1		三
(Mailing duaress MAT BE A 7031 OFFICE DO.	<u> </u>		_ :,
			<del>-</del>
D. If amending the registered agent and/or register		nter the name of the	
new registered agent and/or the new registered to	office address:		
Name of New Registered Agent			
<u> </u>			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	istered Agent:	t bitsione of the position	
I hereby accept the appointment as registered agent.	i am jamiliar with and accept t	ie onugations of the position.	
C:		if al amain a	
Signa	nture of New Registered Agent,	y cnanging	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John D</u>	<del>Doc</del>	
X Remove	<u>v</u>	Mike J	<u>lones</u>	
X Add	<u>sv</u>	Şally Ş	<u>Smith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	11	5	David G. Halpryn	1900 Biscaune Divd
Add				Suite & Miami, FL 331396
Remove 2) Change				
Add				
Remove Change		_ <del>_</del>		
Add				
Remove 4) Change				
Add		· <u>-</u>		
Remove				
5) Change	<u></u>	<del></del>		
Add				
6) Change		<u>.</u>		
Add				
Remove				

h additional sheets, if necessary).	icles, enter change(s) he (Be specific)			
				<del></del>
		, , . <b></b> .		<del></del>
		<u> </u>		
		<u></u>	<del></del>	<del></del>
amendment provides for an excl	hange, reclassification, o	or cancellation of issued	shares,	
isions for implementing the ame if not applicable, indicate N/A)	enament it not contained	<u>a in the Amenament its</u>	<u>eit;</u>	
y not applicable, material (WA)				
	<u></u>			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 8/3/100	data)
(no more than 90 days after amendment file	aate)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without s action was not required.	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amendment.	llowing statement idment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Signature  (By a director, president or other officer – if directors or officers	
selected, by an incorporator if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	e, or other court
appointed fiduciary by that fiduciary)	e, or other coun
	e, or other coun