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Florida Department of State

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ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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COR AMND/RESTATE/CORRECT OR O/D RESIGN 1900 NORTH UNIVERSITY DRIVE CONDO ASSOC INC

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Articles of Amendment-

to Articles of Incorporation

2015 AUG 31 AH 9: 43

	of	OFOME ARY BE DIAGE A ANALETE FEBRIO	
1900 NORTH UNIVERSITY DRIVE CONDO ASSOC INC		"A AMADETE, EL 資利資	
(Name of Corporation as curren	tly filed with the Florid	la Dept. of State)	
P09000012929			
(Document Numb	or of Corporation (if kno	own)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For i</i>	Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporati	<u>ion:</u>	•	
name mist be distinguishable and contain the word "corpora	tion" or "incorporated"	The new	
"Company" or "Co." may not be used in the name.	non or incorporate	or the above tasion Corp. Or The	
B. Enter new principal office address, if applicable:	400 ANSIN BLVD		
(Principal office address MUST BE A STREET ADDRESS	S) SUITE 400 A		
	HALLANDALE, FL 3	3009	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	400 ANSIN BLVD	•	
	SUTTE 400 A		
	HALLANDALE, FL 3	33009	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	ce address in Florida, e address:	nter the name of the	
Name of New Registered Agent: MICHAE	IL W. SIMON	•	
	BOCA RATON BLVD	#100	
New Registered Office Address:	(Flor	ida street addiress)	
. BOCA R.	ATON	Florida 33431	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent. I am fa		he obligations of the position.	
<u></u>	lignature of New Register	red Agent, if changing	

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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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	RON BARR	5011 S STATE RD 7
Add			SUITE 107
X Remove			DAVIE PL 33314
2) Change	P	DOVIE LIEBERMAN	400 ANSIN BLVD
X Add	- 		SUITE 400A
Remove			HALLANDALE FL 33009
3) Change	ST	ZUSHA TENNENBAUM	400 ANSIN BLVD
X Add			SUTTE 400 A
Remove .			HALLANDALE FL 33009
4) Change			
Add			
Remove			
5) Change			
Add		,	
Remove		•	
6) Change			
• • • • •	<u></u>		
Add ,			
Remove		Page 2 of 4	

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If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adop	AUGUST 20, 20		, 	if other than
date this document was signed.				
Effective date if applicable:			<u> </u>	***
	(rio more than 90 d	lays after amendment file	date)	
Note: If the date inserted in this black document's effective date on the Depart			uirements, this date wi	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	100	••	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the mambers an	d the number of votes cas	st for the unandment(s)
There are no members or members adopted by the board of directors		e amendment(s). The arm	endment(s) was/were	٠
	م والمساحد ا	-	٠.	
Dated	5 OCAIT	· ·		
Signaturo	+			
have not been		the board, president or or orator — if in the hands of our fiduolary)		
RON BAR	R			
: <u></u>	(Typed or	printed name of person s	igning)	
PRESIDE	NT.		·	:
		FPH- of amount itemina		
	•	(Title of person signing	S)	

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