

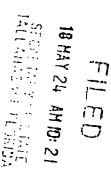
(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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05/24/18--01016--010 **35.00



And R. WHITE

MAY 2.5 2013

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: VISTA MARINA	RESIDENCE CORP			
DOCUMENT NUMB					
The enclosed Articles of	f Amendment and fee are su	ebmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
I	ROQUE N MUNOZ				
_		Name of Contact Person	n		
•	VISTA MARINA RESIDENCE CORP				
_	Firm/ Company				
(58 SE 6 ST APT 1401				
_	Address				
ì	MIAMI, FL 33131				
_		City/ State and Zip Cod	e		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:	,		
ROQUE N MUNOZ		at (805	252-5991 de & Daytime Telephone Number		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

18 MAY 24 AM 10: 21

, Florida

(Name of Corporation as currently filed with the Florida Depl-Adf State) 5 7: 5 F. L. DK(DA P16000086873 (Document Number of Corporation (if known)-Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: PO BOX (Mailing address MAY BE A POST OFFICE BOX) 960416 MIAMI, FL 33296

(City) New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent

New Registered Office Address:

new registered agent and/or the new registered office address:

VISTA MARINA RESIDENCE CORP

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

Signature of New Registered Agent, if changing

(Florida street address)

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	<u>PT</u>	John Do	<u>e</u>	
X Remove X Add	<u>V</u> <u>SV</u>	Mike Jor Sally Sn		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change Add	-	_		
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				·
5) Change		_		
Add				<u> </u>
Remove				
6) Change				
		_		
Add Remove				
11010				

Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recomment.	e applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u>)
☐ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the sharehole must be separately provided for each voting group ent	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
by	<u> </u>
(voting group,	
■ The amendment(s) was/were adopted by the board of d action was not required.	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporat action was not required.	ors without shareholder action and shareholder
Dated_r 5/17/17	<u> </u>
Signature + 14	_
(By a director, president or ot	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)
ROQUE N MUNOZ	
(Typed or	printed name of person signing)
P	
	(Title of person signing)

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