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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:	WINIT WESTCHESTER		
DOCUMENT NUMBE	R: P17000090840			
	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this ma	tter to the following:		
CÌ	/NTHIA ALVAREZ			
 !		Name of Contact Perso	on	
C	& A FINANCIAL PLANN	NNING & BUSINESS CONSULTING LLC		
		Firm/ Company		
15	313 SW 8TH WAY MIAN	41 FL, 33194		
		Address	<u> </u>	
را Mi	IAMI, FL 33194			
<u>1</u>	·-·	City/ State and Zip Coo		
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ca _l	gbusinessconsulting@gma	sed for future annual repor	• mati Castian	
	E-mail address: (to be di	sed for future annual repor	t notification)	
For further information co	oncerning this matter, pleas	se call:		
CYNTHIA ALVAREZ		786 at (8121103	
Name of C	Contact Person	Area Co	ode & Daytime Telephone Number	
 Enclosed is a check for th	e following amount made	payable to the Florida Dep	partment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mailln</u>	Address		Address	
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327			on of Corporations Centre of Tallahassee	
	ssee, FL 32314		N. Monroe Street, Suite 810	
Ì		Tallah	assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

CONTINUUM SUMMIT WESTCHESTER INC

(Name	of Corporation as currently	filed with the Florida Dep	ot. of State)
P17000090840			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607	1006 Florida Statutes, this FI	orida Profit Corporation a	idopts the following amendment(s) to
its Articles of Incorporation:		,	,
A. If amending name, enter the new n	ame of the corporation:		
	-		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A p	npany," or "incorporated" professional corporation r	or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S	STREET ADDRESS)		
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST	OFFICE BOX)		
į	•		
			1.
D. If amending the registered agent ar		s in Florida, enter the na	me of the
new registered agent and/or the ne	IELE BITAR		2.1
Name of New Registered Agent	TELE BITAK		<u></u>
` i	1900 NORTH BAY SHORE	DRIVE 4501	
	(Florida street	address)	
New Registered Office Address:	MIAMI		Florida
	(C	(ity)	(Zip Code)
ŀ			
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar wit	h and accept the obligation	ns of the position.
	3		•
	a 1 d		
<u>:</u>	sellemon		
	Signature of New Reg	istered Agent, if changing	
Check if applicable			
☐ The amendment(s) is/are being filed p	oursuant 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)

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 I	Doe	
X Remove) Y	Mike .	<u>Jones</u>	
X Add	1 <u>SV</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	2	<u>Name</u>	<u>Addres</u> s
I) Change	P		SALUME, ADOLFO, MR	100 SOUTH POINTE DRIVE
Add				MIAMI BEACH, FL 33139
X Remove				
2) Change	.i			
Add	i			
Remove 3) Change	il			
Add				
Remove	- į 1 1			
4) Change				
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Remove	11			
5) Change	ı i			
Add				
Remove				
6) Change	1 .			
Add	l i			
Remove	(j) (j)			

Attach additio	r adding additional nal sheets, if necessa	ry). (Be specific)			
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provisions fo	ent provides for an r implementing the	amendment if no	ification, or can t contained in th	cellation of issue e amendment its	<u>d shares.</u> elf:	
(if not ap	plicabl <mark>e, indicate N//</mark>	4)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
——————————————————————————————————————	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not n document's effective date on the Department of Sta	neet the applicable statutory filing requirements, this date will not be listed as the te's records.
Adoption of Amendment(s) (CHEC	K ONE)
The amendment(s) was/were adopted by the ince action was not required.	orporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for approximation of the shareholders was/were	reholders. The number of votes cast for the amendment(s) roval.
	areholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes cast for the amendm	ent(s) was/were sufficient for approval
by	."
(voting	group)
07/21/21 Dated il	
Signature gellent	
(By a director, presiden	t or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court that fiduciary)
iELE BITAR	
(Ту	ped or printed name of person signing)
DIRECTOR	
(Tit)	e of person signing)