

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	⇒ #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1





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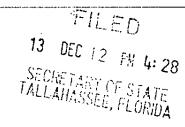
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## COVER LETTER

TO: Amendment Section Division of Corporations		
Home Builders	and Contractors A	Association of Brevard, Inc.
DOCUMENT NUMBER: 708161		
The enclosed Articles of Amendment and fee are subm	itted for filing	
Please return all correspondence concerning this matter	to the following.	
Sandra Nicotra		
(	Name of Contact Persor	1)
Home Builders and Contract	tors Associat	tion of Brevard, Inc.
	(Firm/ Company)	
1500 W. Eau Gallie Blvd.	Ste., B-2	
	(Address)	
Melbourne, FL 32935		
(	City/ State and Zip Code	2)
snicotra@hbca-br	evard.org	
E-mail address: (to be used	for future annual report i	notification)
For further information concerning this matter, please of	all:	
Sandra Nicotra	<sub>31/</sub> 321	254-3700 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Ce	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:
■ \$35 Filing Fee □\$43.75 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)
Mailing Address Amendment Section		Address ment Section
Division of Corporations	Divisio	n of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Building Secutive Center Circle
A SELECTION OF THE COMPUTER		issee, FL 32301



## Articles of Amendment to Articles of Incorporation

	of	
Home Builders and Conf	tractors Association of	Brevard, Inc,
(Name of Corporation as current	y filed with the Florida Dept. of St.	nte)
708161		
(Doc	ament Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617, amendment(s) to its Articles of Incorporat		ot For Profit Corporation adopts the following
A. If amending name, enter the new na	me of the corporation:	
		The nev
		orated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in	the name.	
B. <u>Enter new principal office address.</u> (Principal office address <u>MUST BE A S</u> T		
(Principal office address <u>MUST BE A SI</u>	<u>KELLADDRESS</u> )	
	<u></u>	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	rable: DEFICE ROV:	
(Marting dadress MAT III. / I Cost v	<u> </u>	······································
	***************************************	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
D. If amending the registered agent and	Vor registered office address in Flo	wids, enter the name of the
new registered agent and/or the new		The state of the s
Name of New Registered Agent:	Sandra Nicotra	
	1500 W. Eau Gallie Bl	vd. Ste, B-2
	Florida street addre	<del> </del>
New Registered Office Address:	<b>\$.4</b> .11	0000
	Melbourne	Florida 32935
	(City)	(Zip Code)
New Registered Agent's Signature, if ch	ianging Registered Agent:	
I hereby accept the appointment as registe	ered agent. I am familiar with and a	ecept the obligations of the position.
	Signature of New Registered Agent	t, if changing

Page 1 of 4

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.

Example: X Change X Remove X Add	V Mi	in Doe ke Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	<u>P</u>	Corey Lancaster	1500 W. Eau Gallie Blvd. Ste. B-2
Add			Melbourne, FL 32935
Remove			
2) X Change	<u>V</u>	Scott Krenz	1500 W. Eau Gallie Blvd Ste, B-2
Add			Melbourne, FL 32935
Remove 3 ) X Change	T	Terry Locke	1500 W. Eau Gallie Blvd. Ste. B-2
Add			Melbourne, FL 32935
Remove			
4) X Change	S	Kristi Patjens	1500 W. Eau Gallie Blvd. Ste, B-2
Add			Melbourne, FL 32935
Remove			
51 Change		-	
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

1 11:0	tional Articles, enter change(s) he reessary). (Be specific)	ere:		
(which additional sheets, if no	veessary). (Be specific)			
<u> </u>				
<u> </u>			<del> </del>	
			<del></del>	
	•		<del>, ", "</del>	

Page 3 of 4

The date of each amendment date this document was signed	•	, if other than the
Effective date if applicable:	November 21, 2013	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated Dec	cember 10, 2013	
Signature		
	chairman or vice chairman of the board, president or other officer-if directors	
(By the	not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
(By the have r other	tot been selected, by an incorporator - if in the hands of a receiver, trustee, or	

(Title of person signing)