121583

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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Amend, au/17/15

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tailahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION	Hovianna II Apts. Inc), 		
72 DOCUMENT NUMBER:	1583			
The enclosed Articles of Amen	dment and fee are subm	nitted for filing.		
Please return all correspondenc	e concerning this matte	r to the following:		
Larry A. Edwards				
		(Name of Contact	Person)	
		(Firm/ Compa	ny)	
601 South Palmway				
		(Address)	· · · · · · · · · · · · · · · · · · ·	
Lake Worth Fl 33460				
	((City/ State and Zi	p Code)	
laedj@bellsouth.net				
E-m	ail address: (to be used	for future annual r	eport notification	n)
For further information concern	ing this matter, please of	all:		
Larry A. Edwards			561 at	382301 585-7572
(N	ame of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pay	able to the Florida	Department of	State:
■ \$35 Filing Fee □	1\$43.75 Filing Fee & 1 Certificate of Status	3\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Add Amendment S		_	Street Address Amendment Secti	ion

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building



June 4, 2015

LARRY A. EDWARDS 601 SOUTH PALMWAY LAKE WORTH, FL 33460

SUBJECT: HOVIANNA II APTS, INC.

Ref. Number: 721583

We have received your document for HOVIANNA II APTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please be specific in your intentions regarding the officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

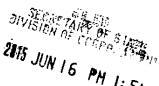
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 915A00011755



Articles of Amendment to Articles of Incorporation



Hovianna II Apts. Inc.	•	de Bent of State)
(Name of Corporation a	s currently filed with the Flori	da Dept. of State)
721583		
(Docume	ent Number of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
na		The second
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	"corporation" or "incorporated	The new " or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab	le: na 60/ Sa	Palmway
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL	DRESS) LAKE WO	xth Fl 33460
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>) <u>na</u>	
		
D. If amending the registered agent and/or regist new registered agent and/or the new registere		enter the name of the
Name of New Registered Agent:	18	
-	(Flo	rida street address)
New Registered Office Address:		
_	na .	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Relative the Agent's Agent as registered agent.		he obligations of the position.
	Signature of New Registe	red Agent if changing

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	<u>v</u> !	Iohn Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PT	ALFRED REICHMAN	10038 SE OSPREY POINTE DR
X Add			HOVE SOUND FLORIDA 33455
X Remove			ROBENS CASIMIR Lemont
2) Change	***************************************	ROBEN CASIMIR	
AddRemove			
3) Change	- 11/2		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti	icles, enter change(s) here:	
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
	,	
na		
		_
		
		_
		_
		_
		_

	APRIL 30 2015		
The date of each amend		, if oth	her than the
late this document was s	= '	•	
Effective date <u>if applic</u>	APRIL 30 2015		
silective date <u>ir appne</u>		after amendment file date)	
Note: If the date inserte locument's effective date	in this block does not meet the applicab on the Department of State's records.	le statutory filing requirements, this date will not be listed	i as the
Adoption of Amendme	t(s) (<u>CHECK ONE</u>)		
The amendment(s) was/were sufficient		e number of votes cast for the amendment(s)	
There are no memb adopted by the boa		endment(s). The amendment(s) was/were	
Dated _	AAY 18 2015		
6' - 4	Lang A. Burner	r, lle	
Signature _	The state of the s	oard, president or other officer-if directors	
		r – if in the hands of a receiver, trustee, or	
	ther court appointed fiduciary by that fid		
•	Larry A. Edwards		
	(Typed or print	ed name of person signing)	
	Vice President		
	(Tit	le of person signing)	