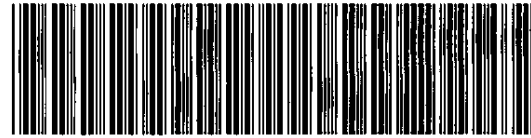


726927



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entry Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Roberts AUG 31 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TAMARAC FAIRWAY ASSOCIATION, INC.

DOCUMENT NUMBER: 726927

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAREN deVALLE
(Name of Contact Person)

TAMARAC FAIRWAYS ASSOCIATION, INC.
(Firm/ Company)

8205 NW 61st ST #B319
(Address)

TAMARAC, FL 33321
(City/ State and Zip Code)

kdelvalle@MSN.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen deValle at (954) 720-7815
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
10 AUG 27 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TAMARAC FAIRWAYS ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

726927

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8205 NW 61st ST APT B319

TAMARAC, FL 33321

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8205 NW 61st ST APT B319

TAMARAC, FL 33321

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

Name of New Registered Agent: _____

New Registered Office Address: _____

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES</u>	<u>KAREN delVALLE</u>	<u>8305 NW 61st ST APT 302C</u> <u>TAMARAC, FL 33321</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>V-PR</u>	<u>JACK LONGO</u>	<u>8105 NW 61st ST APT A210</u> <u>TAMARAC, FL 33321</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>SECR</u>	<u>PHIL CLARK</u>	<u>8405 NW 61st ST APT 314D</u> <u>TAMARAC, FL 33321</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type Of Action</u>
TRES 1	STORA, JIM	8105 NW 61 st ST APT A209 TAMARAC, FL 33321	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE
TRES 2	LEAVY, MIKE	8305 NW 61 st ST APT 204C TAMARAC, FL 33321	<input checked="" type="checkbox"/> ADD <input type="checkbox"/> REMOVE
P -	ROSEFF, JERRY	8205 NW 61 st ST APT B111 TAMARAC, FL 33321	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> REMOVE
S D	ROSEFF, DIANE	8205 NW 61 st ST APT B111 TAMARAC, FL 33321	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> REMOVE
D	COPPALA, BARBARA	8105 NW 61 st ST APT A202 TAMARAC, FL 33321	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> REMOVE
T -	WASSERMAN, ELAINE	8205 NW 61 st ST APT 206 TAMARAC, FL 33321	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> REMOVE
VP -	ALTSCHULA, GILDA	8305 NW 61 st ST APT 103 TAMARAC, FL 33321	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> REMOVE

The date of each amendment(s) adoption: 7/7/10

(date of adoption is required)

Effective date if applicable: 7/7/10

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 8/23/10

Signature Karen deValle

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

KAREN deVALLE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)