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Amend

JUL 2 3 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	n: Woodbridge	Estates As.	sociation
DOCUMENT NUMBER: _	NO	1060	
The enclosed Articles of Ame	ndment and fee are sub	nitted for filing.	
Please return all corresponder			
alyaya	yra Turne	(Name of Contact Person	
		(Name of Contact Person)
RCN	1 Realth Grow	(Firm/ Company)	
)	(Firm/ Company)	
	1 Business.		
		(Address)	
Sa	1250tg, 72	342) (City/ State and Zip Code	
		(City/ State and Zip Code	e)
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
	•		_) 917 - 393J ode & Daytime Telephone Number)
(Name of Con	tact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pa	yable to the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Ac			Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation filed with the Florida Dept. of State) (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office 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.

Page 1 of 4

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)

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	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	D	Marti Hill	6371 BUSINESS BILD #200 Saksota 72 34246
2) Change Add Remove	<u>D</u>	Mancy Lawrence	6371 Business Blyd #200 Sakgota, 72-34221
3) Change Add Remove			
4) Change Add Remove	***************************************		
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adop	tion: Narch 1,202
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were
Dated	13-12 -4- 2
Signature	
	n or vice chairman of the board, president or other officer-if directors
	selected, by an incorporator – if in the hands of a receiver, trustee, or
other court app	ointed fiduciary by that fiduciary)
Alexandra	turna
(T)	yped or printed name of person signing)
Communi	ty Association Manager
(*	Title of person signing)