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below) on the top and bottom of all pages of the document.

(((H180001220303)))

Electronic Filing Cover Sheet



H180001220303ABCR

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: FRANK, WEINBERG, BLACK, P.L.

Account Number : I20040000083

Phone

: (954)474-8000

Fax Number

: (954)474-9850

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

KMORO@FWBLAW.NET

# COR AMND/RESTATE/CORRECT OR O/D RESIGN TUSCANY PROPERTY OWNERS ASSOCIATION, INC. #

Certificate of Status	0
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APR 27 2018

I ALBRITTON

Please date and original date of.

sent last week. Per Diena Cusking
4/25/18



April 25, 2018

### FLORIDA DEPARTMENT OF STATE

TUSCANY PROPERTY OWNERS ASSOCIATION, INC. 1600 SAWGRASS CORPORATE PKWY SUITE 400 BUNRISE, FL 33323

SUBJECT: TUSCANY PROPERTY OWNERS ASSOCIATION, INC.

REF: N12000004687

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

Irene Albritton
Ragulatory Specialist II

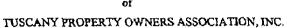
FAX Aud. #: H18000122030 Letter Number: 718A00008483

RECEIVED

18 APR 26 AM 10: 05

SECRETARY OF STATE
FALLAHASSEE, FLORDER

# Articles of Amendment to Articles of Incorporation



2018 AM 8:57

(Name of Corporation	as currently	filed with the Flori	da Dept. of State)
N12000004687			
(Docur	nent Number	of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes,	this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the	e comoration	1.	
			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		r" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. <u>Enter new principal office address, if applics</u> (Principal office address <u>MUST BE A STREET A</u>	ble: DDRESS)		
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )		
	-		· ·
D. If amending the registered agent and/or reginew registered agent and/or the new register			enter the name of the
Name of New Registered Agent:	-	. WEINBERG, ESQ.	
_ , ;	7805 S.W. 6	th COURT	
New Registered Office Address:		(Flo	rida street address)
new Registered Office Address.	PLANTAT)	ON	33324
		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing l	Parrietovari A		•
I hereby accept the appointment as registered ages			the obligations of the position.
		Steven A.	Weinberg
	Sign		ered Agent, if changing

Page 1 of 4

H18000122030 3

If smending 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 latter of the office title:

P = President; Y= 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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

Example: X.Change X.Remove X.Add	PT John De V Mike Je SV Sally S	ones	
Type of Action (Check One)	Title	Name	∆ddress
l)Change			
Add			<del></del>
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			
Add			
Remove			
_			
6)Change			
Add			
Remove			

E. If amending or adding additional Artical (attach additional sheets, if necessary).	gles, enter change(s) here: (Be specylic)
	,
HI,	
	<u> </u>

Page 3 of 4

H18000122030 3

Πh	date of each amendment(5) ad	option:	if other than the
late	this document was signed.		
ı	ective date <u>if applicable:</u>		
		(no more than 90 days after amendment file date)	
	ie: If the date inserted in this blooment's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will cartment of State's records.	l not be listed as the
.da	option of Amendment(s)	(CHECK ONE)	
J	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) $\mathbf{I}$ .	
Ş	There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
	Dated 4-26-1		
	Signature		
	(By the chain have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator—if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	✓	Judd Brown	
	<del></del>	(Typed or printed name of person signing)	
	·	President	
		(Title of person timing)	

H18000122030 3