N 14000009380

(Red	questor's Name)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	RASS POIN	TE PROPERTY O	WNERS AS	SOCIATION, INC.
N14000009 DOCUMENT NUMBER:	380			
The enclosed Articles of Amendment and	d fee are subm	nitted for filing.		
Please return all correspondence concern	ing this matter	r to the following:		
MIKE MILLER				
	((Name of Contact Po	erson)	
EMPIRE MANAGEMENT GROUP IN	IC.			
		(Firm/ Company	y)	
770 ALMOND ST SUITE A				
		(Address)		
CLERMONT FL 34711				
	((City/ State and Zip	Code)	
mmiller@empiremenagementgrp.con	n			
E-mail address	s: (to be used	for future annual rep	ort notification	on)
For further information concerning this m	natter, please c	call;		
MIKE MILLER		at	352	535-0099
(Name of Co	ntact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo	ount made pay	vable to the Florida I	Department of	State:
	Filing Fee & [te of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certi s Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is osed)
Mailing Address Amendment Section		_	reet Address nendment Sec	tion

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment . to Articles of Incorporation of

FILED

2018 AUG 21 AM 11: 07

(Name of Corporation as current N14000009380	tly filed with the	: Florida Dept.	of State LARY OF ST
N1400009380			MLLAHASSEE,
(Document Numb	er of Corporation	ı (if known)	
fursuant to the provisions of section 617,1006. Florida Statutes mendment(s) to its Articles of Incorporation:	s, this <i>Florida N</i> o	ot For Profit Co	orporation adopts the following
. If amending name, enter the new name of the corporati	on:		
			The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorpe	orated" or the a	hbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	n/a		
Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a		
). If amending the registered agent and/or registered offic	e address in Flo	rida, enter the	name of the
new registered agent and/or the new registered office a	ddress:		
Name of New Registered Agent:			
New Registered Office Address:		(Florida street c	address)
registered systematics.			
	(City)		, Florida (Zip Code)
	(City)		(λίρ Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan		ccept the obliga	tions of the position.
	gnature of New I	Registered Agen	it. 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> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	VP	Jeff Myers	770 Almond St Suite A
Add			Clermont FL 34711
X Remove			
2) Change	VP	Steve Williams	770 Almond St Suite A
× Add			Clermont FL 34711
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articatus (attach additional sheets, if necessary).	(be specific)
/a	
	<u> </u>
	·
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	date of each amendment this document was signed	• • • • • • • • • • • • • • • • • • • •	, if other than the
	ective date if applicable:	8/15/2018	
	- 	(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date will no he Department of State's records.	t be listed as the
Add	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) opproval.	
	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.	
	8/15/ Dated	2018	
		DocuSigned by: De Meier	
	Signature	e chairman or vice chairman of the board, president or other officer-if directors	
	have i	not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Jos	seph Meier	
		(Typed or printed name of person signing)	
	Pro	esident	
	_	(Title of person signing)	