# 118705

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### **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: <u>UUB LA COSTA, HOMENDALIS ASSOCIATION</u> , IDC DOCUMENT NUMBER: <u>N/8705</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Any Diaz or Brad Edwards Name of Contact Person  Courtey Property Management Firm/Company  13250 &W 135 Avenue  Address  Miami, FLorida 33186  City/ State and Zip Code  Activa a Courtey property mant, com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)

TO: Amendment Section

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

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Club la Costa Homeown	ers Association, Inc.
(Name of Corporation as currently filed with the F	lorida Dept. of State)
N 18705	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
D/A	The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	D/A
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:(City)	, Florida (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 .	With and accept the obligations of the position.  Agent, if changing  Agent, if changing  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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	D	Guzman, Juan	8141 SW 209 ST Milami, Fly 33189
2) Change Add Remove	7/0	Anni-Marie Anteana	8135 SW 208 Ter miami, Fy 33189
3) X Change Add Remove	D	Gates, THOMAS	8415 5 NU 208 Terr Milami, FG 33189
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	
A) (A	
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<del></del>	
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
N/L	)

The date of each amendment(s) adoption:				
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.			
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):			
"The number of votes cast for	or the amendment(s) was/were sufficient for approval			
by	(voting group)			
The amendment(s) was/were adopt action was not required.	oted by the board of directors without shareholder action and shareholder			
☐ The amendment(s) was/were adopt action was not required.	sted by the incorporators without shareholder action and shareholder			
Dated 5/1	0/2012			
selected,	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary)			
-	Brad Edwards (Typed or printed name of person signing)			
_	President (Title of person signing)			