Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000072366 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : SOLOMON & FURSHMAN, LLP

Account Number: I20050000182 Phone

: (305)861-8034

Fax Number

: (305)861-8012

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

 $\mathbb{R}^2_{<}$ COR AMND/RESTATE/CORRECT OR O/D RESIGN BENT CREEK MASTER HOMEOWNERS ASSOCIATION, INC.

> Certificate of Status 0 Certified Copy 04 Page Count Estimated Charge \$35.00

> > MAR 1 6 2017

I AI BRITTON

To: 8506176380

Articles of Amendment of

Articles of Incorporation BENT CREEK MASTER HOMEOWNERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dent, of State) N05000003915 (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 RE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. Mamending the registered suppt 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 Royistered 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:

3058614056

(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 = Secretory; 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	Y Mi	nn Doe ike Jones Ilv Smith	·
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PD	Teresa Baluja	730 NW 107TH AVENUE
Add			SUITE 300
X Remove			MIAMI, FL 33172
2) Change	STD	Raisa Krausc	730 NW 107TH AVENUE
Add			SUITE 300
X Remove			MIAMI, FL 33172
3)Change	VD	Greg McPherson	730 NW 107TH AVENUE
Add		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	SUITB 300
X Remove			MIAMI, FL 33172
4) Change	PD	Dean Andreozzi	8895 MILITARY TRAIL
X Add		<u>-</u>	SUITE 101-B
Remove			PALM BEACH GARDENS, PL 33
5) Change	αV	Nelson Bennett	8895 MILITARY TRAIL
X Add	•		SUITE 101-B
Remove			PALM BEACH GARDENS, FL 33
6) Change	STD	Tara Jinks	8895 MILITARY TRAIL
XAdd			SUITE 101-B
Remove			PALM BEACH GARDENS, FL 33
		Page 2 of 4	

If amonding or adding additional Art (attach additional sheets, if necessory).	(Be specific)
(mice is additional sheets, if incessory).	(De specific)
	
·	
·	
	· · · · · · · · · · · · · · · · · · ·

Page 3 of 4

. . . .

The date of each amendmen		, if other than the
date this document was signe Effective date if applicable:	March 7, 2017	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s)	
There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	oh 15, 2017	
Signature	Dean antreon	
have	to chairman or vice chairman of the board president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
D	ean Andreozzi	
	(Typod or printed name of person signing)	
Pr	resident	
_	(Title of person signing)	