## N180000 10915

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION		MMERCIAL ASSOCI	ATION, INC	, 	
DOCUMENT NUMBER:	N18000010915				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Cara Chieffallo					
		(Name of Contact Pers	on)		
K. Hovnanian Homes					
		(Firm/ Company)		-	
3601 Quantum Blvd					
		(Address)	- ,		
Boynton Beach, FL 33426					
		(City/ State and Zip Co	ode)		
cchieffallo@khov.com					
	-mail address: (to be use	d for future annual repo	rt notification	1)	
For further information con-	cerning this matter, please	e call:			
Cara Chieffallo		5 at	661	364-3326	
	(Name of Contact Persor		Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida De	partment of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CYPRESS	KEY	COMMERCIAL ASSOCIATION.	INC

(Name of Corporation as currently filed with the Florida	Dept. of State)		
N18000010915	per of Corporation	((0))	
(Document Num)	er of Corporation	(ii known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida N</i> o	of For Profit Corporation adopts the following	lowing
A. If amending name, enter the new name of the corporat	tion:		
	<del>_</del>	Th	e new
name must he distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorpo	rated" or the abbreviation "Corp." or "	Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	)		<del></del>
			2
C. Enter new mailing address, if applicable:		<del>'</del> ·	020
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
			020 J.   192
			32
D. If amonding the registered quest and/or registered off			<u>~</u>
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	<u>ce aquress in #101</u> iddress:	ida, enter the name of the	2:  5
Name of New Registered Agent:			<u> </u>
		-	
<del></del>		(Florida street address)	<del></del>
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and ac	cept the obligations of the position.	
	anature of Nova Re	gistarad Agunt 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	Р	Kathleen Kurtz	3601 Quantum Blvd Boynton Beach, FL 33426
x Remove			
2) Change Add	<u>P</u>	Kevin Borkenhagen	3601 Quantum Blvd Boynton Beach, FL 33426
Remove 3) Change Add Remove			
4) Change Add	<del></del>		
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additio	onal Articles, enter change(s) here: essary). (Be specific)	
-			
			-
			<del></del> -

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			6/5/2020						
The date of each a date this document	mendment was signed	(s) adoptio	n;					, if othe	r than the
Effective date if ap	plicable:	6/5/2020							
			(no more than	90 days after i	amendment	file date)			
Note: If the date in document's effective	serted in th e date on th	is block doe ie Departme	es not meet the ent of State's re	applicable sta ecords.	tutory filing	requirement	s, this date wil	II not be listed :	is the
Adoption of Amen	dment(s)		(CHECK ON	<del>(E</del> )					
☐ The amendmen was/were suffice	it(s) was/w cient for ap	ere adopted proval,	by the member	rs and the nun	iber of votes	s cast for the	amendment(s)	)	

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There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated6.16.2020
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
GETTIMA PICKACO (Typed or printed name of person signing)
SECRETARY TREASURER (Title of person signing)