704350

Office Use Only



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11/24/08--01033--007 **35.00

OB DEC - B PM 1: 55

STATE RATIONS

Amend 12/9/08

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPOR | ATION: WILLIAMS | BURG ASSOCIATIO | on |
|--|--|--|---|
| DOCUMENT NUMB | er: 7 <i>06</i> | 350 | |
| The enclosed Articles of | of Amendment and fee a | re submitted for filing. | |
| Please return all corres | pondence concerning thi | s matter to the following: | |
| | | •• | , |
| 1.6 | AN SUMNER | | |
| | AN SUMNER (Name | of Contact Person) | |
| m | ANAGEMENT AS | SIST. INC | |
| | ANAGEMENT AS | m/ Company) | ,, |
| 26 | 26 E. Commer | cial Blvd #4 (Address) | <u>.</u> |
| <u>F</u> | nt Lauderdale | FC 33064 tate and Zip Code) | |
| | (City/ St | tate and Zip Code) | · · · · |
| For further information | concerning this matter, | please cáll: | er i |
| lans | Jumper | at (954) 772 | -7012 |
| | Contact Person) | (Area Code & Daytim | |
| Enclosed is a check for | the following amount m | nade payable 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) | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| 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 C | |

Tallahassee, FL 32301



December 1, 2008

IAN SUMNER MANAGEMENT ASSIST INC 2626 E. COMMERCIAL BLVD #4 FORT LAUDERDALE, FL 33064

SUBJECT: WILLIAMSBURG ASSOCIATION INC

Ref. Number: 706350

We have received your document for WILLIAMSBURG ASSOCIATION INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form submitted is incomplete and the last page is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 208A00058725

008 DEC -8 AM 8: 06 SECRETARY OF STATE

Articles of Amendment to

Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) 706350 (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:

| bbreviation "Corp." or "Inc." <u>"Company" or</u> | ntain the word "corporation" or "in r "Co." may not be used in the name. | corporated" or the |
|---|---|-------------------------|
| Enter new principal office address, if appl | | |
| Principal office address <u>MUST BE A STREE</u> | <u>raddress</u>) | |
| | <u>-</u> | |
| Enter new mailing address, if applicable: | | |
| (Mailing address <u>MAY BE A POST OFFIC</u> | <u></u> | |
| | | |
| | | |
| . If amending the registered agent and/or renew registered agent and/or the new regis | | nter the name of the |
| | | |
| Name of New Registered Agent: | | |
| Name of New Registered Agent: | | |
| Name of New Registered Agent: New Registered Office Address: | (Florida street address) | |
| | | , Florida |
| | (Florida street address) (City) | , Florida (Zip Code) |

Page 1 of 3

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)

Type of Action Title Address Name DIRECTOR PAULD PADILLA 3090 NE 48 STREET 1 Add ET. LAUD GLOALE, FL 3D90 NE 48 STREET ■ Add #207 □ Remove FT. LAUDER DALG, FL DIRECTOR KENSLITKIN DIRECTOR APHRODITE LONGE REMOVE E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

| The date of each amendment(s) adoption: 15 SCPTEMBER 2008 | | | | |
|---|--|--|--|--|
| Effective date if applicable: | (no more than 90 days after amendment file date) | | | |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/we was/were sufficient for app | ere adopted by the members and the number of votes cast for the amendment(s) proval. | | | |
| There are no members or adopted by the board of di | members entitled to vote on the amendment(s). The amendment(s) was/were rectors. | | | |
| Dated | December 2008 | | | |
| (By hav | y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary) | | | |
| , , | (Typed or printed name of person signing) | | | |
| · | (Title of person signing) | | | |

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