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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amund as/m/a

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

NAME OF CORPO	ration: Spring Cre	rek Owners Assoc	ciation, luc
DOCUMENT NUM	BER: 74450	9	·····
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
			nu Inc.
	(Firm OI W. Eau Galli		
	Nelbourne, Fo (City/Sta Onssen Ro Bellso E-mail address: (to be use	ate and Zip Code)  Outh, net- ed for future annual report notificati	on)
Ramona (Name		at ( <u>32/</u> <u>652-</u> (Area Code & Daytime	
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)
Amen Divisi	ng Address dment Section on of Corporations Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	,

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation of

Spring Creek Du	uners associatio	u, Inc
	rrently filed with the Florida Dept.	
744509		
(Document N	umber of Corporation (if known)	<del></del>
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of		For Profit Corporation adopts
A. If amending name, enter the new name	of the corporation:	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"		
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STRE</u>		
	<u></u>	•
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u> )		SECRE ASSECTION AND ASSECTION ASSECT
		3 PH 4:
D. If amending the registered agent and/or new registered agent and/or the new re		a, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street address)	<del></del>
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as register position.	ging Registered Agent: red agent. I am familiar with and	accept the obligations of the
_	Signature of New Registered 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
TD_	Rosa J. Bernal	1001 W. EauGallie #127 Melhourne, Fc 3	Blud □ Add □ ☑ Remove
TD_	Nick Miller	1 <u>001 W. Eau Gallie</u> #204 Melbourne, 7c. 3	
			🗖 Add
	ding or adding additional Articles, ento dditional sheets, if necessary). (Be spe		

The date of each amendment(s) ad	loption: 4-30-10
Effective date if applicable:	(date of adoption is required) 4-30-10
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or memb adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated 5-7	7-10
Signature	mona Jaussen
	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator — if in the hands of a receiver, trustee, o
	rt appointed fiduciary by that fiduciary)
<u> </u>	Samona Janssen
	(Typed or printed name of person signing)
	Pres.
	(Title of person signing)