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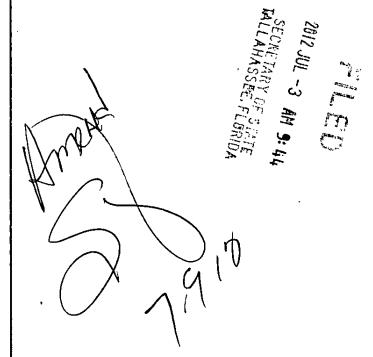
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations Mar Homeowners Assoc NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) <u>Chablis</u> Ct E-mail address: (to be used for future annual report notification For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$\sum \\$43.75 Filing Fee & Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is

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

Enclosed)

Articles of Amendment

to Articles of Inco

Articles of Incorporation
Castel Del Mar Homeowners Association, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
TILO 8 00
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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 BE A STREET ADDRESS) Poca Ruton Fl Mynn
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1452 Chabw Cowlt Boca Raton FL 33477
D. If amending the registered agent 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:
7452 Chablis Court
New Registered Office Address: Boca Raton, Florida 33437 (City), (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. The familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing
Page 1 of 4

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: X Change	<u>PT</u>	John Doe			
X Remove	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
Change Add Remove	工	Bruckner, Marion	7475 champagnePl Boca Raton FU 33433		
2) Change Add Remove	<u>VP</u>	Tuluizmu, Deborah	7440 Chablis Ct Boca Patron FL 33433		
3) Change Add Remove	P_	Cerce, Anne	7440 Champagno Pl Poca Paton FL 33433		
4) Change Add Remove	P	Jensen, Delia	219 40 Palmetto Cir N Bora Raton FL 33433		
5) Change Add Remove	SVf	Joya, Braverman	7457 Chablo Ct Boca Ration FL 33433		
Change Add Remove	<u>ρ</u>	Danny Hermon	21904 Palmetto Cir N Boca Ration FL 33422		

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.

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X Change	PT John D	<u>loe</u>	
X Remove	V Mike J	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add Remove	Vρ	Veronica Ruibal	7472 Chablis Cour- Boca Raton FL 33477
2) Change Add Remove	<u>S</u>	Claudia Graf	7452 Chablis Ct Boca Ration FL
Change Add Remove	T	Christine Maroszan	7460 Chablis Ct Boca hatin Fl 33472
4) Change Add Remove	1	Alysa Kelley	1428 chablis ct Boca Ration FL Brynn
5) Change Add Remove			
6) Change Add Remove			

The date of each amendment(s) adoption:						
Effective date if applicable: 6/18/20/2.						
(no more than 90 days after amendment file date)						
•						
Adoption of Amendment(s) (CHECK ONE)						
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.						
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.						
Dated						
Signature D						
(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)						
Danny Hermon						
(Typed or printed name of person signing)						
tresident						
(Title of person signing)						