## 760806

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(City/State/Zip/Phone #)
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Amend

JAN - 3 2013

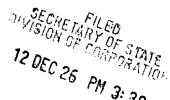
T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO		ttages Associati	on, Inc.
DOCUMENT NUMI	<sub>BER:</sub> 760806		- to Market
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	James Hinson		
		Name of Contact Persor	1
	Kalurna Kottages	Association, Inc	<b>)</b> .
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	1825 Kalurna Ct		
		Address	
	Orlando, FL 3280	)6	
		City/ State and Zip Code	3
aka	njme30@yahoo.co	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
James Hinso	n	at (407	927-8795
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	urtment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Kalurna Kottages Association, Inc.	PM 3:30
(Name of Corporation as currently filed with the F	lorida Dept, of State)
760806	
(Document Number of Corporation (if	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1825 Kalurna Ct.
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Orlando, FL 32806
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1825 Kalurna Ct.
	Orlando, FL 32806
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent  James Hinson	
1825 Kalurna C	<u> </u>
(Florida str	
New Registered Office Address: Orlando	Florida 32806
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	
I nereby accept the appointment as registered agent. I am jaminar w	The congunous of the position.
Signature of New Registered A	Sent if changing
Signature of New Registered A	Igent, 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Chris J Ordetx	1820 Kalurna Ct
Add		·	Orlando, FL 32806
X Remove		•	
2) Change	STD	John Springer	1824 Kalurna Ct.
Add			Orlando, FL 32806
X Remove			
3) Change	PD	Benjamin Nicoll	1824 Kalurna Ct.
X Add			Orlando, FL 32806
Remove			
4) Change	STD	James Hinson	1825 Kalurna Ct.
X Add			Orlando, FL 32806
Remove			*
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
I/CIII/0 AC			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
·	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an and an an and an an and an an and an and an and an an and an
	**************************************

The date of each amendment(s) a	doption: 11/29/2012
Effective date <u>if applicable</u> : 11	/29/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
■ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated_ 12	17/2012
Signature	17/2012 H
(Ву а с	lirector, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	nted fiduciary by that fiduciary)
	JAMES HINSON
	(Typed or printed name of person signing)
	Secretary   Treasurer (Title of person signing)
	(Title of person signing)