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COVER LETTER

TO:	Amendment Section
	Division of Corporation

NAME OF CORPO	PRATION: HOVIANNA V A	PTS. INC				
DOCUMENT NUM	IBER: 761036					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	ZACHARY PHILLIPS, ESQ).				
		Name of Contact Perso	n			
	KELK PHILLIPS, P.A.					
		Firm/ Company	- -			
	12161 KEN ADAMS WAY,	SUITE 110-WI				
		Address				
	WELLINGTON, FL 33414				15 MOV -	
1		City/ State and Zip Cod	le	4192.	A0.	4
VM.	AIYA73@HOTMAIL.COM				2	m
	E-mail address: (to be us	sed for future annual report	notification)	— · · · · · · · · · · · · · · · · · · ·	7	~
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For further information	on concerning this matter, pleas	se call:			12:27	O
ZACHARY PHILLI	PS, ESQ.	561 at (515-0838	* /		
Name	e of Contact Person		ode & Daytime Telephone	Number	_	
Enclosed is a check f	For the following amount made	payable to the Florida Depa	artment of State:			
- easer's r	20 40 3 5 PW . P 8	T642.75 EV E	□050 50 EU - E			
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	□\$52.50 Filing Fee Certificate of Status			
		(Additional copy is	Certified Copy	i din Talian Tanan		ı
		enclosed)	(Additional Copy is enclosed)		50	37
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Mailing Address		Street Address		を を を を を を を を を を を を を を	ဌ	P.

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301





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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2015

ZACHARY PHILLIPS ESQ 12161 KEN ADAMS WAY STE 110-W1 WELLINGTON, FL 33414

SUBJECT: HOVIANNA V APTS. INC.

Ref. Number: 761036

We have received your document for HOVIANNA V APTS. INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA FOR PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

The registered agent must sign accepting the designation.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 615A00023448



COVER LETTER

TO: Amendment Section Division of Corporations

HOVIANNA V APTS NAME OF CORPORATION:	S. INC.		
761036			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
ZACH PHILLIPS, ESQ.			
	Name of Contact Person	n)	
KELK PHILLIPS, P.A.			
	(Firm/ Company)		
12161 KEN ADAMS WAY, SUITE 110-W1			
	(Address)		
WELLINGTON, FL 33414			
(City/ State and Zip Cod	e)	
VMAIYA73@HOTMAIL.COM			
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please of	eall:		
ZACH PHILLIPS	56 at	1	515-0838
(Name of Contact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	artment of S	itate:
S35 Filing Fee \$\B\$43.75 Filing Fee & Certificate of Status Check already Submitted.	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Cliftor	Address Iment Section of Corpo Building Executive Co	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

15 KO7 17 PH 1: 29

HOVIANNA V APTS. INC.

			<u> </u>
·	as current	ly filed with the Florida Dept. of	State)
761036			The state of the state of
(Docur	nent Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not For Profit Corp</i>	oration adopts the following
A. If amending name, enter the new name of the	e corporation	on:	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporated" or the abbr	eviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ıble:	N/A	
(Principal office address MUST BE A STREET A			·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	6240 ELK IVORY DRIVE	
		RENO, NV 89511	
D. If amending the registered agent and/or registered agent and/or the new register	ed office a	ddress:	me of the
Name of New Registered Agent:	KELK PH	ILLIPS, P.A.	
	12161 KE	N ADAMS WAY, SUITE 110-W1	
New Registered Office Address:		· (Florida street addı	rens)
	WELLING	GTON	, Florida 33414
		(City)	(Zip Code)
N D			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	it. I and fan	Agent: hiliar with and accept the obligation	ns of the position.
-		gnative of New Registered Agent, i	fchanging

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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe ce Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	BELLIKOFF, PAUL	20651 BAY BROOKE COURT
Add			BOCA RATON, FL 33498
X Remove			
2) Change	VPD	PULEO, CHRISTOPHER	979 SW 18TH ST
Add			BOCA RATON, FL 33486
X Remove			
3) Change	PD	MAIYA, VIJAY	6240 ELK IVORY DRIVE
X Add		•	RENO, NV 89511
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
N/A				
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		<u> </u>		w : w : .

The date of each amendment(s	adoption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes case sufficient for approval.	t for the amendment(s)
	approved by the shareholders through voting groups, for each voting group entitled to vote separately on the	
"The number of votes of	ast for the amendment(s) was/were sufficient for appro	oval
by		" ~"
;	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder acti	on and ahareholder
Dated	10/29/15	
Signature		WD.
(By	a director, president or other officer – if directors or other, by an incorporator – if in the hands of a receiver winted fiduciary by that fiduciary)	officers have not been r, trustee, or other court
;	VIJAY MAIYA	
,	(Typed or printed name of person sign	ing)
,	PRESIDENT	
:	(Title of person signing)	