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(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL .
. (Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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AOR 2/le/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Harva	rd Street Villas Condominium Association, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Brent Harrell	
<u> </u>	(Name of Contact Person)
	(Firm/ Company)
21 W. Harvard St.	
	(Address)
Orlando, FL 32804	
	(City/ State and Zip Code)
brent.harrell@ E-mail address: (to	gmail.com be used for future annual report notification)
For further information concerning this matter,	please call:
N/A	et (
(Name of Contact Person)	at (
Enclosed is a check for the following amount n	ade payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of Status enclose	Certified Copy Certificate of Status (Additional copy is Certified Copy
Malling 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

FILED

Articles of Amendment to Articles of Incorporation of

2012 FEB -3 AM 9: 39

	A then with the Lu	orida Dept. of State)	£	
			· #**	_
(Documen	t Number of Corpor	ration (if known)		
rsuant to the provisions of section 617.1 nendment(s) to its Articles of Incorporat		es, this <i>Florida Not For I</i>	Profit Corporation adopts th	ne following
If amending name, enter the new na	me of the corporat	tion;		
				The new
me must be distinguishable and contain Company" or "Co." may not be used in		ition" or "incorporated"	or the abbreviation "Corp.	" or " Inc.'
		N/A		
Enter new principal office address, i rincipal office address <u>MUST BE A ST</u>)		
				_
		· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applie		BRENT HARF	2 ⊏1 1	
(Mailing address MAY BE A POST (OFFICE BOX			_
		21 W. HARVA		_
		ORLANDO, F	L 32804	
If amending the registered agent and	d/or registered offi	ce address in Florida, er	iter the name of the	
new registered agent and/or the new	registered office	address:		
Name of New Registered Agent:	BRENT HA	RRELL		
	21 W. HAF	RVARD ST.		
ew Registered Office Address:		(Florida street address)		
ew negatered Office Address.	ORLANDO)	, Florida 32804	
	(City)		, Florida <u>G2GG r</u> (Zip Code)	
	, ,,			
w Registered Agent's Signature, if che ereby accept the appointment as registe			e obligations of the position	<i>1</i> .
	KUM	10/	_ • •	

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	PT 1	ohn Doe	
X Remove	<u>Y</u> <u>N</u>	fike Jones	
_X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Tide	Name	<u>Addres</u> s
1) Change X Add Remove	<u>P</u>	BRENT HARRELL	21 W. HARVARD ST. ORLANDO, FL 32804
2) Change Add Remove	<u>P</u>	KRISTEN IDLE	19 W. HARVARD ST. ORLANDO, FL 32804
3) Change Add Remove			:
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
-	
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The date of each amendment	(s) adoption: 1/25/2012
Effective date <u>if applicable</u> :	1/25/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/w was/were sufficient for ap	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 o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.
Dated 1/2	5/2012 Sugal a
(By the	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
BRENT	HARRELL
	(Typed or printed name of person signing)
VICE-F	PRESIDENT
	(Title of person signing)