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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

NAME OF CORPORATION:	EXECUTIVE CENTER C	ONDOMINIUM ASSOCIATION, INC.
DOCUMENT NUMBER: NO100004	555	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Lea Stokes		
	(Name of Contact Persor	n)
Preferred Management	Services. In	C.
- I o o o o o o o o o o o o o o o o o o	(Firm/ Company)	
411 S. Central Ave. Sui	te B	
	(Address)	
Flagler Beach, FL 32136	3	
1.149.01.204011,1.202.104	(City/ State and Zip Code	<u> </u>
E-mail address: (to be used	for future annual report i	notification)
For further information concerning this matter, please	call:	
Lea Stokes	386 at (439-0134 ode & Daytime Telephone Number)
. (Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

HARBOUR ISLAND EXECUTIVE CENTER CONDOMINIUM ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

V	THE WILL THE FIE	That Depti of State)	
N0100004555	t Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporat	1006, Florida Statute		ation adopts the followin
A. If amending name, enter the new na	me of the corporat	ion:	
n/a			The nev
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated" or the abbrev	
B. Enter new principal office address, i	f applicable:	c/o Preferred Management S	Services, Inc.
(Principal office address <u>MUST BE A ST</u>		411 S. Central Ave. S	Suite B
		Flagler Beach, FL 321	36
C. Enter new mailing address, if applie		c/o Preferred Management S	Services, Inc.
		411 S. Central Ave. S	Suite B
		Flagler Beach, FL 32	136
D. If amending the registered agent and new registered agent and/or the new			e of the
	•	anagement Services, Inc.	
Name of New Registered Agent:		tral Ave. Suite B	
New Registered Office Address:	4110.0011	(Florida street address)	
· · · · · · · · · · · · · · · · · · ·	Flagler Bea	ich , Florida	32136
	(City)	(Zip Co	ode)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe X			of the position.
Sign	nature of New Regis	tered 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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Albaugh, Ryan	c/o Severn Trent Services, Inc.
Add			475 W Town Place, Suite 200
X Remove			Saint Augustine, FL 32092
2) Change	PD	Katie Johnson	c/o Preferred Management Services, Inc.
X Add			411 S. Central Ave., Suite B
Remove			Flagler Beach, FL 32136
3) X Change	SD	Mas, Miguel Dr	c/o Preferred Management Services, Inc.
Add			411 S. Central Ave., Suite B
Remove			Flagler Beach, FL 32136
4) X Change	T D	Anderson, Louise	c/o Preferred Management Services, Inc.
Add	_		411 S. Central Ave., Suite B
Remove			Flagler Beach, FL 32136
5) Change	VD	Jackson, Andrew	
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here:		
(attach additional sheets, if necessary). (Be specific)		
n/a		

· ne	uate of each amendmen	
Effe	ective date <u>if applicable</u> :	November 22, 2013
		(no more than 90 days after amendment file date)
Ado	option of Amendment(s)	(CHECK ONE)
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) pproval.
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.
	Dated	12/4/13 (Kete)
	(By the	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
		Catherine Johnson
		(Typed or printed name of person signing) President (Title of person signing)