N03000003823

| (Req | uestor's Name) | |
|---------------------------|-----------------|-----------------|
| (Add | ress) | |
| (Add | ress) | |
| (City/ | State/Zip/Phone | 9 #) |
| PICK-UP | WAIT | MAIL |
| (Busi | ness Entity Nan | ne) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | iling Officer: | |
| | | |
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| | | |

Office Use Only



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08/30/10--01023--018 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend



AUG 3 1 2010

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: HAMMOC | K BOY OWNETS | S ASSOCIATION, INC |
|--|---|---|
| DOCUMENT NUMBER: NO3 008 | 003823 | |
| The enclosed Articles of Amendment and fee are submit | tted for filing. | |
| Please return all correspondence concerning this matter | to the following: | |
| Stephanie (Name of Co | ntact Person) | |
| CASTLE MAN | DAGENENT Company) | |
| 12270 SWG | 3rd 5+, #200 lress) | |
| PANTATION (City/ State a | FZ 33325 and Zip Code) | <u>-</u> |
| SGARCIA @ C E-mail address: (to be used for | ASTLE GROUP or future annual report notificat | ion) |
| For further information concerning this matter, please ca | all: | |
| Stephanie Garcia (Name of Contact Person) | at (<u>954</u>) <u>792 –</u> (Area Code & Daytim | Looo ext 860 e Telephone Number) |
| Enclosed is a check for the following amount made paya | able to the Florida Department | of State: |
| \$35 Filing Fee \$\square \\$43.75 Filing Fee & Certificate of Status | \$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 | Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center | ns |

Tallahassee, FL 32301

Articles of Amendment

| FILED |
|-----------------|
| AUG 30 D. |
| ALLAHASSA UF ST |

| to | 2010 1110 |
|--|--|
| Articles of Incorpo | oration Tob 30 PM |
| of | oration 2010 AUG 30 PH 4: 07 |
| HAMMOCK BAY OWNERS | ASSOCIATION NEEFING |
| (Name of Corporation as currently filed with | the Florida Dept. of State) |
| N03000038 | 23 |
| (Document Number of Corporate | |
| Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation: | s, this Florida Not For Profit Corporation adopts |
| A. If amending name, enter the new name of the corporation | <u>n:</u> |
| | |
| The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may no | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 40 CASTLE MANAGEMENT 12270 SW 3 ST, #200 |
| C. Enter new mailing address, if applicable: | PLANTATION, FL 33325 |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 40 CASTLE MANAGEMENT POBOX 559009 Ft. LAUDERBALE, PL 33355 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade | |
| Name of New Registered Agent: | |
| New Registered Office Address: (Flori | da street address) |
| | (City) , Florida_ (Zip Code) |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position. | |

Signature of New Registered Agent, 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--|---|--|----------------|
| | | | |
| | | | Add Remove |
| | <u></u> | | |
| E. If amen | ding or adding additional Art dditional sheets, if necessary). | icles, enter change(s) here: (Be specific) | |
| | | | |
| | | | |
| 4-1-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | |
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| | <u></u> | | |

| | each amendment(s |) adoption: 8-10-10 (date of adoption is required) |
|--------------|---|--|
| Effective da | te <u>if applicable</u> : _ | (no more than 90 days after amendment file date) |
| Adoption of | Amendment(s) | (CHECK ONE) |
| | ndment(s) was/were sufficient for appro | adopted by the members and the number of votes cast for the amendment(s) val. |
| | e no members or me by the board of direc | embers entitled to vote on the amendment(s). The amendment(s) was/were ctors. |
| | Dated | 85.00.10 |
| | Signature | Parl Calin |
| | have | he 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) |
| | | PAN ENUARISM (Typed or printed name of person signing) |
| | | (Title of person signing) |

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