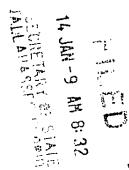


(Requestor's Name) (Address) (Address)	7002552739
(City/State/Zip/Phone #)	01/09/140103100
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	TALLAN & SET
Special Instructions to Filling Officer: 212 Mer Ovary For All Signing Office Use Only Office Use Only	Aprond. 01-21-14



******35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	LAKES COMMU	NITY ASSOCIATION, INC.		
DOCUMENT NUMBER: NO40000	3506			
The enclosed Articles of Amendment and fee are su	abmitted for filing.			
Please return all correspondence concerning this matter to the following:				
Elizabeth B. Dombovary, Esq.				
	(Name of Contact Pe	rson)		
Garbett, Stiphany, Allen & Roza, P.A.				
· · · · · · · · · · · · · · · · · · ·	(Firm/ Company)		
80 SW 8th St, Suite 310	00			
<u> </u>	(Address)			
Miami, FL 33130				
	(City/ State and Zip C	Code)		
edombovary@gs				
E-mail address: (to be us	sed for future annual rep	ort notification)		
For further information concerning this matter, please	se call:			
Elizabeth B. Dombovar	y _{at} 813	, 252-7787		
(Name of Contact Person)	(Are:	Code & Daytime Telephone Number)		
Enclosed is a check for the following amount made	payable to the Florida D	epartment of State:		
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Statu	& □\$43.75 Filing Fee of s Certified Copy (Additional copy is enclosed)	Certificate of Status		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Cli	eet Address endment Section ision of Corporations fron Building I Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

MANDARIN LAKES COMMUNITY ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N0400003506

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corp	oration:	
N/A	The	
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Ir	
B. Enter new principal office address, if applicable:	C/O CASTLE MANAGEMENT	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	ESS) 12270 SW 3rd Street, Suite 200	
	Plantation, FL 33325	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	C/O CASTLE MANAGEMENT	
	12270 SW 3rd Street, Suite 200	
	Plantation, FL 33325	
	Tiantation, 1 E 33323	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent:	d office address in Florida, enter the name of the	
new registered agent and/or the new registered of	d office address in Florida, enter the name of the	
new registered agent and/or the new registered of Name of New Registered Agent:	d office address in Florida, enter the name of the fice address:	
new registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	d office address in Florida, enter the name of the fice address: (Florida street address)	
new registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Signature, if changing Registered New Registered Registered Registered Registered New Registered Registe	d office address in Florida, enter the name of the fice address: (Florida street address) Florida (City) (Zip Code)	
new registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Signature, if changing Registered New Registered Registered Registered Registered New Registered Registe	d office address in Florida, enter the name of the fice address: (Florida street address) , Florida (City) (Zip Code)	

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	<u>V</u> <u>M</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jose Duarte	220 Alhambra Circle
Add			Coral Gables, FL 33134
X Remove			
2) Change	S	Oscar Cardona	220 Alhambra Circle
Add			Coral Gables, FL 33134
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	 _		
Add			
Remove			

f amending or adding additional Artistach additional sheets, if necessary).	(Be specific)	
		<u> </u>
<u></u>		
	···	
		-

	e date of each amendment(s) adoption:e this document was signed.	_, if other than the
Eff	ective date if applicable:	_
	(no more than 90 days after amendment file date)	
Add	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	_{Dated} January 6, 2014	
	Signature /S/ E. Dombovary	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Elizabeth Dombovary	
	(Typed or printed name of person signing)	
	Attorney-in-Fact for Jose Duarte and Oscar Cardona	
	(Title of person signing)	