

11/27/2013 13:53

(FAX)

P.001/006

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : G.L. HOMES
Account Number : I20060000023
Phone : (954) 753-1730
Fax Number : (954) 575-5295

DEC 02 2013

R. WHITE
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
Email Address: steve.helfman@glhomes.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
THE PRESERVE AT BAY HILL ESTATES HOMEOWNERS
ASSOCIAT

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$52.50

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13 NOV 27 PM 1:52

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 NOV 27 AM 9:57

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11/27/2013 13:53

(FAX)

P.002/006

COVER LETTER

((H13000262123 3))

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Preserve at Bay Hill Estates Homeowners Association, Inc.

DOCUMENT NUMBER: N05000010242

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven M. Helfman, Esq., Registered Agent

(Name of Contact Person)

The Preserve at Bay Hill Estates Homeowners Association, Inc.

(Firm/ Company)

1600 Sawgrass Corp Pkwy, Suite 400

(Address)

Sunrise, FL 33323

(City/ State and Zip Code)

steve.helfman@glhomes.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven M. Helfman

(Name of Contact Person)

at (954) 753-1730

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

((H13000262123 3))

FILED

13 NOV 27 AM 9:57

(((H13000262123.3)))
SECRETARY OF STATE
TALLAHASSEE, FLORIDAArticles of Amendment
to
Articles of Incorporation
of

The Preserve at Bay Hill Estates Homeowners Association, Inc.

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

N05000010242

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:A. If amending name, enter the new name of the corporation:

Not Applicable

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*B. Enter new principal office address, if applicable:(Principal office address MUST BE A STREET ADDRESS)

1600 Sawgrass Corporate Parkway

Suite 400

Sunrise, FL 33323

C. Enter new mailing address, if applicable:(Mailing address MAY BE A POST OFFICE BOX)

1600 Sawgrass Corporate Parkway

Suite 400

Sunrise, FL 33323

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:Name of New Registered Agent:

Steven M. Helfman, Esq.

1600 Sawgrass Corporate Parkway, Suite 400

(Florida street address)

New Registered Office Address:

Sunrise

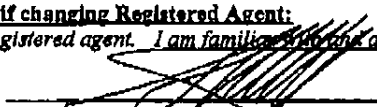
(City)

Florida 33323

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>Barbara Smith</u>	<u>1600 Sawgrass Corp Pkwy</u> <u>Suite 400</u> <u>Sunrise, FL 33323</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>SVD</u>	<u>Marcie DePlaza</u>	<u>1600 Sawgrass Corp Pkwy</u> <u>Suite 400</u> <u>Sunrise, FL 33323</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TD</u>	<u>N. Maria Menendez</u>	<u>1600 Sawgrass Corp Pkwy</u> <u>Suite 400</u> <u>Sunrise, FL 33323</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PD</u>	<u>Salour, Nader</u>	<u>1907 Commerce Lane, Suite 103</u> <u>Jupiter, FL 33458</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VSD</u>	<u>Cesaro, Donna</u>	<u>1907 Commerce Lane, Suite 103</u> <u>Jupiter, FL 33458</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>TD</u>	<u>Wendler, Ed</u>	<u>301 Congress Avenue</u> <u>Suite 500</u> <u>Austin, TX 78701</u>

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

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Not Applicable

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The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

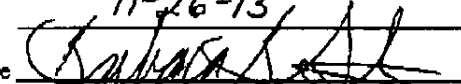
Adoption of Amendment(s) (CHECK ONE)

- ☐ 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

11-26-13

Signature



(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)

Barbara Smith

(Typed or printed name of person signing)

President

(Title of person signing)

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