N0500011852

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10/18/12--01013--005 **35.00

12 OCT 18 PH 12: 56

Amend 10/18/12

COVER LETTER

43.

TO: Amendment Section Division of Corporations
NAME OF CORPORATION:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Knsten Daniels Name of Contact Person
Mame of Contact Person
Firm/ Company
2425 Pineapple Avenue, Suite 108
Mollon Co. T. 20075
City/ State and Zip Code
E-mail address: (to be used forMuture annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (321) 242-2882 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Spiglass South Con	dominium Association Inc. led with the Florida Dept. of State)	
<u>NO50001185</u>	Corporation (if known)	
•	a Statutes, this Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the co	prporation:	
name must be distinguishable and contain the wor. "Corp." "Inc." or Co." or the designation "Corp.	d "corporation," "company," or "incorporated" or the ab " "Inc," or "Co". A professional corporation name must c	The new obreviation contain the
word "chartered," "professional association," or the	abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		,
	· .	
C. Enter new mailing address, if applicable:		£ "}
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	75
		. 8 歸
D. If amending the registered agent and/or registe		12 OCT 18 PM 12: 56
new registered agent and/or the new registered	office address:	F.5.
Name of New Registered Agent		<u>ග</u>
	(Florida street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	-
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent; I am familiar with and accept the obligations of the position.	
Signature of N	lew 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)

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 John	Doe	
X Remove	V Mike Jones		
X Add	SY Salb	<u>(Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	V	Michael Mirda	215 South Marco Wa
X Add			Satellite Beach, FL
Remove			32937
2) Change	<u>S</u>	Brenda Corliss	PO Box 428
X Add			Melbourne, Fl. 32902
Remove			<u> </u>
3) Change			
Remove			
4) Change			
Add			
Remove			1977 to 1775 de 1985
5) Change			
Add			
Remove		,	
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
	The state of the s
	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	endment if not contained in the amendment itself:
or amendment provides for an exc provisions for implementing the and (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:
an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption	n: 10 8 1 2	
Effective date if applicable:	10/16/12	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by The Condo A	sociation " (voting group)	
The amendment(s) was/were adopted be action was not required.	y the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted be action was not required.	y the incorporators without shareholder action and shareholder	
Dated /0-8	-12 	
(By a director selected, by a	r, president or other officer - if directors or officers have not been an incorporator - if in the hands of a receiver, trustee, or other court unitary by that fiduciary)	
	(Typed or printed name of person signing)	
	Director	
(Title of person signing)		