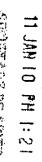
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	_	MAIL .
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

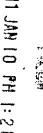
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PARK SQUARE CITYHOMES ASSOCIATION, INC.			
DOCUMENT NUM	BER: N06000003351		
		itted for Elina	
The enclosed Afficies	of Amendment and fee are subm	ntied for filing.	
Please return all corre	spondence concerning this matter	r to the following:	
		KROLIKOWSKI	
	(Name of C	Contact Person)	
	BANK (OF TAMPA	
	(Firm/	Company)	
	601 BAYSHORE	BLVD., SUITE 100	
	, (A ć	ldress)	
		, FL 33606	
	(City/ State	and Zip Code)	
	BKROLIKOWSKI@I	BANKOFTAMPA.COM	
	E-mail address: (to be used	for future annual report notificati	on)
For further information	a concerning this matter, please o	all:	
BARBARA KROLI	KOWSKI	_at (813) 872-1221	
(Name o	of Contact Person)	at (813) 872-1221 (Area Code & Daytime	Telephone Number)
Enclosed is a check fo	r the following amount made pay	able to the Florida Department o	f State:
	□ \$43.75 Filing Fee & Certificate of Status	S43.75 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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

Articles of Amendment Articles of Incorporation



PARK SQUARE CITYHOMES ASSOCIATION, INC.

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

N06000003351	
(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:

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) C. Enter new mailing address, if applicable: 601 BAYSHORE BLVD. (Mailing address MAY BE A POST OFFICE BOX) SUITE 100, ATTN: KEITH BROWN TAMPA, FL 33606 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: RICHARD L. JUNKERMANN Name of New Registered Agent: 601 BAYSHORE BLVD. SUITE 904 New Registered Office Address:. (Florida street address) **TAMPA** Florida 33606 (Zip Code)

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

A. If amending name, enter the new name of the corporation:

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

ignature of New Registered Agent, if changing

Page 1 of 3

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>	Name	Address	Type of Action
D	KEITH M. BROWN	601 BAYSHORE BLVD.	☑ Add
		SUITE 100	Remove
		TAMPA, FL 33606	<u> </u>
D	BARBARA KROLIKOWSKI	601 BAYSHORE BLVD.	☑ Add
		SUITE 100	
		TAMPA, FL 33606	
D	DOUGLAS ARTHUR	601 BAYSHORE BLVD.	
		SUITE 100	
		TAMPA, FL 33606	
	additional sheets, if necessary). (Be spec		
			··································
	· · · · · · · · · · · · · · · · · · ·		<u> </u>
			*-, **-, **-
		<u> </u>	
		 	
			
			

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	
<u>D</u>	SCOTT SHIMBERG	611 WEST BAY STREET TAMPA, FL 33606	□ Add ☑ Remove	
<u>D</u>	HPB MANAGEMENT, INC.	611 WEST BAY STREET TAMPA, FL 33606	Add Z Remove	
<u>D</u>	HPB FISHHAWK RANCH	611 WEST BAY STREET TAMPA. FL 33606		
E. If amend (attach ad	E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
,				
· .				
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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)

<u>Title</u>	<u>Name</u>	Address_	Type of Action
D	HYDE PARK BUILDERS, IN	611 WEST BAY STREET TAMPA, FL 33606	□ Add □ Remove
	,		
E. If amend (attach ad	ing or adding additional Articles, enter ditional sheets, if necessary). (Be spec	r change(s) here: ific)	
- ,,, ,			

The date of each amendment(s) adoption:				
Effective date if applicable:	12/20/2010	(date of adoption is required)		
	(no mor	e than 90 days after amendment file date)		
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)		
The amendment(s) was/we was/were sufficient for app		members and the number of votes east for the amendment(s)		
There are no members or a adopted by the board of dis		to vote on the amendment(s). The amendment(s) was/were		
		vice chairman of the board, president or other officer-if directors		
		ed, by an incorporator – if in the hands of a receiver, trustee, or lifeduciary by that fiduciary)		
	Keith (Typ	ped or printed name of person signing)		
	Dire	(Title of person signing)		

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