106000012319

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	ry/State/Zip/Phone	; #)
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COVER LETTER

TO: Amendment Section Division of Corporations San Remo Homeowners Community Association Inc. N6000012319 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jessica Mahadeo (Name of Contact Person) Blue Crest Management LLC (Firm/ Company) 2962 Trivium Circle, Ste 203 Fort Lauderdale, FL 33312 (City/ State and Zip Code) admin@bluecrestmanagement.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 745-0899 (Area Code & Daytime Telephone Number) Jessica Mahadeo (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

Articles of Amendment to Articles of Incorporation of

SAN REMO HOMEOWNERS COMMUNITY ASSOCIATION INC

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

N600012319

(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:

amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
, <u>, , , , , , , , , , , , , , , , , , </u>	The n
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Con "Company" or "Co." may not be used in the name.	p." or "Inc
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
······································	
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:	
(Florida street address) New Registered Office Address:	
New Registered Office Address.	
, Florida	
(City) (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 positi	ion,
Signature of New Registered Agent, if changing	

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>Mik</u>	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>T</u>	Pamela Levengood	2962 Trivium Circle, Ste 203
Add			Fort Lauderdale FI 33312
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Aud Remove			

ttach additional shee	ts, if necessary).	(Be specific)			
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The	date of each amendment(s) adoption: 6/17/2013			
	ective date if applicable: 6/17/2013			
(no more than 90 days after amendment file date)				
Ado	option of Amendment(s) (<u>CHECK ONE</u>)			
	The amendment(s) was/were adopted by the members and the number of votes east 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 06 28 13 Signature — + - + - + - + - + - + - + - + - + - +			
	(By the chairman or vice thairman 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)			
	Silvana Kopin			
	(Typed or printed name of person signing)			
	Secretary			
	(Title of person signing)			