(Requestor's Name)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 31, 2012

RAND HUNT HOTEL MAX, INC: 4787 W IRLO BRONSON HWY KISSIMMEE, FL 34746

SUBJECT: 4787 RESORT CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N07000002287

We have received your document for 4787 RESORT CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts Regulatory Specialist II

Letter Number: 512A00019323

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: 4787 RESORT CONSOMINIUM ASSOCIATION
DOCUMENT NUMBER: NO7 00000 2287
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rand Hunt
(Name of Contact Person)
Hotel Max Inc (Firm/Company)
(Firm/ Company)
4787 W. Irlo Bronson Hwy (Address)
Kissimmer FL 34746
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rand Hunt at (813) 310 - 5473 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Tiling Fee
Milling Address Affiendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Corporations Corporations Corporations Corporations Corporations Corporations Corporations Collifton Building Corporations Corpor

Articles of Amendment to Articles of Incorporation

of

SEURE TARY OF STATE TALLAHASSEE, FLORIDA

12 AUG 13 AM 11: 06

4787 RESDRT CONSOMINIUM ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
N07000002287
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the follown amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
NA
The 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.
3. Enter new principal office address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
<u> </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: NA A
(Florida street address)
New Registered Office Address:
Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
10
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 <math>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	SV Sally Smith			
Type of Action (Check One)	<u>Title</u> <u>Nam</u>	<u>ne</u>	<u>Addres</u> s	
1) X Change Add Remove	P Je	& Carter	3719 S. Plaza Drive Santa Anapca 92704	
2)ChangeAddRemove	<u>v</u> 3	ames Carter	3719 S. Plaza Drive Santa Anal CA 92704	
Change Add Remove	TS Te	rry Hatrield	4787 W. Irlo Bronson Memorial + Kissimmee, FL 34746	ł,
4) Change Add Remove			,	
5) Change Add Remove				
6) Change Add Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
(anach additional sheets, if neces	ssary). (Be specific)				
	MIH				
					
					
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	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	<u> </u>				

The date of each amendment(s) adoption: Sune I 2012
Effective date if applicable: June 1, 2012
(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 8/8/12
Signature 1 em/C Hayun
(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)
Terry Hatreld
(Typed or printed name of person signing)
Dec/Treas.
(Title of person signing)