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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SOLOMON & FURSHMAN, LLP

Account Number : I20050000182 Phone

: (305)061-B034 Fax Number : (305)861-A012

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE TOWNHOMES AT HAWKS POINT OWNERS ASSOCIATION,

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8/25/2014

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Townhom	es at Hawks Poin	t Owners Association, Inc.
DOCUMENT NUMBER: NO700003	990	
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Ben Solomon, Esq.		
	(Name of Contact Person	1)
Solomon & Furshman, L	LP	
	(Firm/ Company)	
1200 Brickell Avenue, Pł	Ⅎ 2000	
	(Address)	
Miami, Florida 33131		
	(City/ State and Zip Code	:)
Ben@sfllp.com		
E-mail address; (to be used	•	otification)
For further Information concerning this matter, please of	zali:	
Victor Recondo, Esq.	₄ ,305	938-6916 Ade & Daytime Telephone Number)
(Nume of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pay)able to the Florida Depa	riment of State:
□ \$35 Filing Fee	\$43,75 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 Taliahassee, FL 32314	Amend Division Clifton 2661 Es	Address ment Section n of Corporations Building tocutive Center Circle 1556c, FL 32301

Articles of Amendment to Articles of Incorporation

Comment of the balance of the Court of the C	lorida Dept. of State)
N0700003990	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Stamemendment(s) to its Articles of Incorporation:	ates, this Florida Not For Prefit Corporation adopts the following
A. If smending name, enter the new name of the corpora	ution:
Hawks Point West Homeowners' Ass	sociation, Inc.
	mion" or "incurporated" or the abbreviation "Corp." or "Inc."
"Campany" or "Co," may not be used in the name.	N/A
B. <u>Enter new principa l office address, if applicable:</u> (Principal office address <u>MUST REA STREET ADDRES</u>)	
Principal vijas maresi <u>most pas Street Moores</u>	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A
(maning unus) MATT BE A FUEL VEFICE BUA	
D. If amending the registered agent and/or registered aff	then unicipase in Movido, antay the name of the
new registered agent and/or the new registered of fice	
Name of New Registered Agent:	
	(Flurido street pridress)
	(Flurido atrust peldruss)
Name of New Registered Agent: New Registered Office Address:	, Florida
Name of New Registered Agent;	, Florida
Name of New Registered Agent: New Registered Office Address: (City New Registered Agent's Signature, if changing Registers	(Zip Code)
Name of New Registered Agent: New Registered Office Address:	(Zip Code)

Page 1 of 4

SECRETARY OF STATE

FILED

To: 18506176380

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 hoing 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 Frecutive Officer; GFO = 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 marmer. 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.

X Change X Remove X Add	Y Mik	<u>1 Doc</u> & Jones y Smith	
Type of Action (Check One)	Title	<u> Маръе</u>	Address
1) Change	PD	Fulghum, Joe	6972 Lake Gloria Road
Add			Orlando, FL 32809
X Remove			
2) Change	PD	Lefere, Brady	6972 Lake Gloria Road
X_Add			Orlando, FL 32809
Kemove			
3) Change			
Add			
Remove			
4) Change			**************************************
Add			<u></u>
Remove			
5)Change	<u></u>		
Add			
Remove			
δ) Change			
Add			
Remove			

If amending or adding additional Art (utuch additional sheets, if necessary).	(Paragetta)
(which additional sheets, if necessary).	(pe specific)

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The date of each amendment(s) ad	option;	, if other than the
date this document was signed.		
Effective date if applicable:	<u> </u>	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s)	
There are no members or members dopted by the board of directed.	pers entitled to vote on the amendment(s). The amendment(s) was/were pre-	
Dated 8-	13-14	
Signature	$\supset /2//$	
(Ny the chair have not des	poun or vice chairman of the hoard, president or other officer-if directors en selected by an incorporator — if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Brady Lefe	эге	•
	(Typed or printed name of person signing)	
President		
 	(Title of person vigning)	