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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	S HOMEOWNE	RS' ASSOCIATION, INC.
DOCUMENT NUMBER: N08269		
The enclosed Articles of Amendment and fee are submit	tted for filing.	
Please return all correspondence concerning this matter t	to the following:	
Grace Rodriguez		
()	Name of Contact Person)
Eisinger Brown Lewis Fra	inkel & Cha	aiet, PA
	(Firm/ Company)	
4000 Hollywood Blvd., #2	65-S	
	(Address)	
Hollywood, Florida 33021		
((City/ State and Zip Code	*)
E-mail address: (to be used for	or future annual report r	otification)
For further information concerning this matter, please ca	dl:	
Grace Rodriguez	_at (954	894-8000
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made payer	able to the Florida Depa	rtment of State;
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	1\$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 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

: FILED

THE PURTICUS HUMEUW	NERS ASSOCIATION, INC.	2015 FEB 12 PM 5: 0:
(Name of Corporation as currently filed	with the Florida Dept. of State)	
N08269		SECRETARY OF STATE TAIL AHASSEE, FLORID
(Document)	Number of Corporation (if known)	A.T.
Pursuant to the provisions of section 617.1006, Funendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Not For Profit Corpor	ation adopts the following
A. If amending name, enter the new name of t THE PORTICOS NO. 1 CON	the corporation: DOMINIUM ASSOCIATION, IN	IC.
	ord "corporation" or "incorporated" or the abbrev	1 ne new
3. Enter new principal office address, if appli	cable: 14839 SW 80) st
Principal office address MUST BE A STREET	ADDRESS	33193
C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE	EBOX) 12350 SW 1	32ct
	MIAMI, FL 33	3186
D. If amending the registered agent and/or renew registered agent and/or the new regist	gistered office address in Florida, enter the namered of fice address:	e of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered ag	g Registered Agent: ent. I am familiar with and accept the obligations	of the position.
Sign	ature 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	PT Y SY	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Remove			
2) Change			
Add			
3)Change			
Add			·
4) Change			
Add			
5) Change			
Add	4.		
Remove			
6) Change Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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	date of each amendment(s) ad	option: 01/22/2015	, if other than the		
	this document was signed.				
em	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
Ado	option of Amendment(s)	(CHECK ONE)			
8	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the l.	amendment(s)		
	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	0/2/15			
	Signature	nul lef			
	have not bee	man or vice chairman of the board, president or other office on selected, by an incorporator — if in the hands of a received appointed fiduciary by that fiduciary)			
		aldo Rodriguez			
		(Typed or printed name of person signing)			
		President			
		(Title of person signing)			