## N0900006820

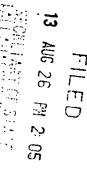
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	WNHOMES HOMEO	WNERS' ASSOCIATION, INC.
DOCUMENT NUMBER: N0900006	820	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Herica Valerus		
	(Name of Contact Person	n)
AVON POINT TOWNHOMES H	OMEOWNERS	' ASSOCIATION, INC.
	(Firm/ Company)	
1385 Avon Lane		
	(Address)	
North Lauderdale, FL 33	8068	
	(City/ State and Zip Code	e)
avonpoint@gmail	.com	
E-mail address: (to be used	for future annual report i	notification)
For further information concerning this matter, please	call:	
Herica Valerus	<sub>at</sub> 954	532-2639
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$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	Address Iment Section on of Corporations Building Executive Center Circle

## Articles of Amendment to Articles of Incorporation

of

## AVON POINT TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

(Name of Corporation as currently filed	d with the Flor	ida Dept. of State)		_
N0900006820	Number of Co	rporation (if known)		
Pursuant to the provisions of section 617.1006, I amendment(s) to its Articles of Incorporation:			ration adopts the	he following
A. If amending name, enter the new name of	the corporation	on:		
				The new
name must be distinguishable and contain the w "Company" or "Co." may not be used in the n		ion" or "incorporated" or the abbre	viation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable:		1385 Avon Lane		
(Principal office address <u>MUST BE A STREE</u>		North Lauderdale Fl.	33068	_ <b>z</b>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		1385 Avon Lane		AUG 2G
		North Lauderdale Fl.	33068	R 2
D. If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent;		ldress:	ne of the	÷ 05
	85 Avon	Lane		
New Registered Office Address:	(	Florida street address)		
No	orth Laude	erdale , Florida	33068	
	(City)		(Zip Co	ide)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agentials.	gent fam fan		s of the position	n.

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>Mi</u>	nn <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Herica Valerus	1403 Avon Lane
X Add			North Lauderdale Fl. 33068
Remove			<del></del>
2) Change	S	Samayne Lawes	1405 Avon Lane
X Add			North Lauderdale Fl. 33068
Remove			
3 ) Change	T	Kevin Bens	1385 Avon Lane
XAdd			North Lauderdale Fl. 33068
Remove			
4) Change	D	LEVIN, ZVI	2070 N. OCEAN BOULEVARD #3
Add			BOCA RATON, FL 33431
X Remove			
5) Change	D	LEVIN, AVIDAHN	2070 N. OCEAN BOULEVARD #3
	<del></del>		BOCA RATON, FL 33431
X Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art utach additional sheets, if necessary).	(Be specific)			
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The	date of each amendment	(s) adoption: 08/15/2013	, if other than the
	this document was signed ctive date <u>if applicable</u> :	08/16/2013	_
		(no more than 90 days after amendment file date)	
Ado	ption of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated	1/22/13	
	have r	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	<del></del>
	Ý	HERICA VALERUS (Typed or printed name of person signing)  PRESIDENT (Title of person signing)	