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JUL 24 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations
MARINA COVE TOWNHOME
NARINA COVE TOWNHOME NAME OF CORPORATION: ASSOCIATION ON LAKE WILDNA INC.
DOCUMENT NUMBER: NO 900000 8236
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kocco BASSO
(Name of Contact Person)
(Firm/ Company)
14126 CALIDORE CT
(Address)
14/26 CAlidone CT (Address) Winter G-ARDEN FL 34787 (City/ State and Zip Code)
(City/ State and Zip Code)
BASSOCPA@ GMAIL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rocco BASSo at (1/07) 928-0782 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Barrier \$\Bigcup \$43.75 Filing Fee & Barrier \$\Bigcup \$52.50 Filing Fee & Certificate of Status
(Additional copy is Certified Copy
enclosed) (Additional Copy is
Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

Franchisco (Company)

NARINA COVE TOWNHOME (Name of Corporation as currently filed w			SEGRETARY OF	,,, 1 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		<u></u>)	THE LANASSEE, P	LUNDA
	ODOOO 8236	m) '	<	
•	• •	•		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida No</i>	t For Profit Cor	poration adopts the follo	wing
A. If amending name, enter the new name of the	e corporation:	NIA	The	new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		rated" or the abl	breviation "Corp." or "I	nc."
B. Enter new principal office address, if applica				
(Principal office address <u>MUST BE A STREET A</u>	I <u>DDRESS</u>)	NIA		
		7		
		······································	······	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	. 1		
		MA		
		1-1//		
	- , , , , , , , , , , , , , , , , , , ,			
D. If amending the registered agent and/or regi		ida, enter the n	ame of the	
new registered agent and/or the new register	red office address:	!		
Name of New Registered Agent:		1	_	
	/ /	<i>IT</i>		
New Registered Office Address:	(Florida street addres	s)		
		, Florid	da	
	(City)		(Zip Code)	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent		cept the obligati	ons of the position.	
Signat	ure 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 John I V Mike J SV Sally S	<u>lones</u>	·
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P</u>	Kimberly Foy	815 ChESTNUT ST. CLERMONT FL
Remove 2) Change Add	<u>P</u>	Amber Wing	34711 819 Chestnut ST. Clermon TFC
Remove 3) Change			3471/
Add	,		
4) Change Add			
Remove 5) Change			
Add			
6) Change			
Remove			

f amending or adding a ttach additional sheets, i	i necessary).	(ве ѕресіліс)				
						
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The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the		
Effective date if applicable: (no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)			
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were			
Dated	7/1/14			
Signature	nberly Di For			
(By the chairman	n or vice chairman of the board, president or other officer-if directors elected, by an incorporator — if in the hands of a receiver, trustee, or			
	ointed fiduciary by that fiduciary)			
	Himberly Foy (ped or printed name of person signing)			
(T)	/ped or printed name of person signing)			
	TRESIDENT			
	(Title of person signing)			