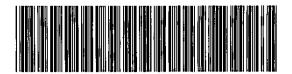
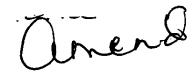
N12000010359

(Re	equestor's Name)	
(A c	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	ocument Number)	
. Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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12/15

<u>ĆOVER LETTER</u>

TO: Amendment Section Division of Corporations		
· ·	ROPERTY OW	NERS ASSOCIATION, INC.
DOCUMENT NUMBER: N12000010	359	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Domingo Sanchez		
	(Name of Contact Per	son)
Titan HOA Management	, LLC	
	(Firm/ Company)	
1631 East Vine Street St	uite#300	
	(Address)	
Kissimmee, FL 34744		
	(City/ State and Zip C	ode)
admin@titanhoa.d		
E-mail address: (to be used	for future annual repo	rt notification)
For further information concerning this matter, please	call:	
Domingo Sanchez	_{at (} 407	705-2190
(Name of Contact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida De	partment of State:
\$35 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \sin \text{\$\sin \tex	□\$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	Ame Divis Clift 2661	et Address Indicate the state of the state

Articles of Amendment . . . to Articles of Incorporation

FILED.

TAPESTRY PROPERTY OWNERS ASSOCIATION INC. 29 PH 4: 15

7

(Name of Corporation as currently filed with the Florida Dept. of State) N12000010359

(Document Number of Corporation (if known)

A. If amending name, enter the new name			The
name must be distinguishable and contain "Company" or "Co." may not be used in		tion" or "incorporated or the	appreviation Corp. or
3. Enter new principal office address, if	annlicable:	1631 East Vine St	reet Suite#300
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE		Kissimmee, FL 34744	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1631 East Vine Street Suite#300	
, <u> </u>		Kissimmee, FL 34	744
			.
If amending the registered agent and new registered agent and/or the new			e name of the
Name of New Registered Agent:		Management, LLC	
Name of New Registered Algent.		/ine Street Suite#3	300
•	 _	Florida street address)	<u></u>
New Registered Office Address:	//::		24744
	Kissimmee	, Fl	orida 34744
	(City)		(Zip Code)
ew Registered Agent's Signature, if cha	nging Registered	Agent:	artique of the magiticus
hereby accept the appointment as register	red agent. I am fan	nitiar with and accept the oblig	ations of the position.
		······································	

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:

y

(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	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D/P	RUSSELL, DOUGLAS R	5511 HANSEL AVENUE
Add			ORLANDO, FL 32809
X Remove			
2) Change	VP/S	SECRIST, ROBERT L	5511 HANSEL AVENUE
Add			ORLANDO, FL 32809
X Remove			
3) Change	D/T	HOOKER, MARCUS P	5511 HANSEL AVENUE
Add			ORLANDO, FL 32809
X Remove			
4) Change	D/P	Camp, Jeremy	1631 East Vine Street Suite#300
X Add			Kissimmee, FL 34744
Remove			
5) Change	D/VP	Lovett, Derek	1631 East Vine Street Suite#300
X Add			Kissimmee, FL 34744
Remove			
6) Change	D/ST	Valantasis, John	1631 East Vine Street Suite#300
X Add			Kissimmee, FL 34744
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
N/A				
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				····-
				
		· · · · · · · · · · · · · · · · · · ·	····	
			<u> </u>	

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The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	September 9, 2014	
<u> </u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere 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 lirectors.	
Dated	10/15/14	
Signature		
have n	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator—if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Jeremy	Camp	
	(Typed or printed name of person signing)	
Preside	ent	
	(Title of person signing)	

.: . .