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Amend

SEP 2.7 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ONDOMINIUM ASS	OCIATION.	INC.
NE3000000108 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm			<u> </u>
Please return all correspondence concerning this matte	r to the following:		
NINA CHAVES			
	(Name of Contact Pe	rson)	· · · · · · · · · · · · · · · · · · ·
MCKINLEY COMPANIES, LLC			
	(Firm/ Company)	
320 N. MAIN STREET, SUITE 200			
	(Address)		
ANN ARBOR, MI 48104			
	(City/ State and Zip C	lode)	
ealonso(a)mckinley.com			
E-mail address: (to be used	for future annual repo	ort notification	
For further information concerning this matter, please (calf:		
NINA CHAVES	at _	734	769-8520 ext 10102
(Name of Contact Person)	· · · · · · · · · · · · · · · · · · ·	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida D	epartment of :	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address	Str	eet Address	

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

STUDIOPARC II CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as curr	ently filed with the Flor	rida Dept, of State)
N13000000108		
(Document Nu	mber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not Fa</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated	U or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>'S'</u>)	35
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		~
S. Fr. D. Jan. J.		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		enter the name of the
Name of New Registered Agent:		
same of the registered sigem.		
	(Fi	orda street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am		the obligations of the position.
	Signature of New Regist	ered Agent, if changing

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: XChange X Remove X Add	<u>V</u> <u>Mi</u>	nn Dog ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DST	LEWIS, NATE	320 NORTH MAIN STREET
Add			SUITE 200
X Remove			ANN ARBOR, MI 48104
2) Change	DST	BERRIZ, ANDREW	320 NORTH MAIN STREET
X Add			SUITE 200
Remove			ANN ARBOR, MI 48104
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional.	dding additional Art sheets, if necessary),	(Be specific)				
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The date of each amendment(s) adoption:	if other than the
· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s was/were sufficient for approval.)
There are no members or members entitled to vote on-the amount (s). The amendment(s) was/were adopted by the board of directors.	
Dated SEPTEMBER 1971, 2018	
Signature	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ALBERT M. BERRIZ	
(Typed or printed name of person signing)	
PRESIDENT & DIRECTOR	
(Title of person signing)	