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COVER LETTER

TO: Amendment Section Division of Corporations

ROYAL POINCIA NAME OF CORPORATION:	NA NEIGHBORHO	DD ASSOCIA	TION, INC.	
N13000003860				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matter	ter to the following:			
AnnaMaria Windisch-Hunt				
	(Name of Contact Po	erson)	•	
ROYAL POINCIANA NEIGHBORHOOD ASSO	CIATION, INC.			
	(Firm/ Company	y)		
404 S C St				
	(Address)			_
LAKE WORTH, FL 33460				
	(City/ State and Zip	Code)		
rpnalakeworth@gmail.com				
E-mail address: (to be use	d for future annual rep	ort notification)	
For further information concerning this matter, please	e call:			
AnnaMaria Windisch-Hunt	at	954	289-1862	
(Name of Contact Person		(Area Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the following amount made p	ayable to the Florida I	Department of	State:	
\$35 Filing Fee		Certif s Certif	O Filing Fee cate of Status ed Copy ional Copy is sed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

ROYAL POINCIANA NEIGHBORHOOD ASSOCIA	ATION, INC.	<i>5.</i> .
(Name of Corporation as co	urrently filed with the Flori	da Dept. of State)
N13000003860		2011
(Document)	Number of Corporation (if kn	own) See 23 D
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	own) State Profit Corporation adopts the follow
A. If amending name, enter the new name of the corp	oration:	ONIC
N/A		The n
name must he distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	rporation" or "incorporated	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered	d office address in Florida	enter the name of the
new registered agent and/or the new registered of		the state of the
Name of New Registered Agent: N/A		
	(Flo	rida street address)
New Registered Office Address:	,	,
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I c		he obligations of the position.
The state of the s	<i>y</i>	δ.
	Signature of New Registe	red 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: X Change X Remove X Add	<u>V</u> <u>Mike</u>	Doc Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Yolanda Sanchez	511 S D St
Add			Lake Worth, FL 33460
X Remove			
2) Change	T	Annie Donnelley	1319 Lucerne Ave
Add			Lake Worth, FL 33460
X Remove	.,	5	24.0
3) Change	<u> </u>	Ramsay A. MacLeod	24 South C Street
X Add			Lake Worth, FL 33460
Remove			
4) Change	T	Annie Donnelly	1319 Lucerne Ave
X Add			Lake Worth, FL 33460
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The	e date of each amendment(s) adoption:	, if other than the
	e this document was signed.	
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be current's effective date on the Department of State's records.	elisted as the
Adı	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 amendment(s). The amendment(s) was/were adopted by the board of directors.	
	August 16, 2018 Dated	
	Signature Annallaria Windisch-Hunt	
	(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 tiduciary)	
	AnnaMaria Windisch-Hunt	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	