Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094

Phone

: (770)777-2091

Fax Number : (770)220-1943

R WHITE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN VILLAS I AT ESPLANADE BY SIESTA KEY NEIGHBORHOOD ASS

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COVER LETTER

TO: Amendment Section Division of Corporations VILLAS LAT ESPLANADE BY SIESTA KEY NEIGHBORHOOD ASSOCIATION, INC. NAME OF CORPORATION: N13000004857 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sharon K. Gray (Name of Contact Person) Triad Professional Services, LLC (Firm/ Company) 1720 Windward Concourse, Ste. 390 (Address) Alpharetta, GA 30005 (City/ State and Zip Code) sgray@triadpros.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sharon K. Gray Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

P 3/6

Articles of Amendment Articles of Incorporation

N13000004857		
(Document	t Number of Corporation (if known)	
ursuant to the provisions of section 617,1006, mendment(s) to its Articles of Incorporation:	Florida Statutes, this Florida Not For Pro	ofit Corporation adopts the following
. If amending name, enter the new name of	the corporation:	
		The no
ame must be distinguishable and contain the v Company" or "Co." may not be used in the t	vord "corporation" or "incorporated" or name.	the abbreviation "Corp." or "Inc.
. Enter new principa l office address, if any Principal office address MUST BE A STREE		
	·	
	·	
. Enter new mailing address, if applicable	<u>.</u>	
(Muiling address MAY BE A POST OFFI	CE BOX)	
. If amending the registered agent and/or i		er the name of the
new registered agent and/or the new regi	stered of fice address:	
Name of New Registered Agent:		
	(Florida street uddress)	
New Registered Office Address:		
New Registered Office Address:		, Florida

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_Rumove X_Add		Dog 2 Jones 2 Smith	
Type of Action (Check One)	Title	Name	Address
1) XX Change	PD	Andrew (Drew) E. Miller	551 N. Cattlemen Road
	-		Suite 200
Remove			Sarasosta, FL 34232
2) Change	<u>v</u>	John S. Kempton	551 N. Cattlemen Road
Add			Suite 200
XX Remove			Sarasosta, FL 34232
3) Change	VP	Michael Mansfield	551 N. Cattlemen Road
XX Add			Suite 200
Remove			Sarasosta, FL 34232
4) XX Change	VPSD	Michelle M. Campbell	551 N. Cattlemen Road
^dd			Suite 200
Remove			Sarasosta, FL 34232
5) XX Change	VPTD	Valerie McChesney	551 N. Cattlemen Road
Add			Suite 200
Remove			Sarasosta, FL 34232
6) Change			
Add		• • • • • • • • • • • • • • • • • • • •	
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
(attach additional sheets, if necessary).	(Be specific)					
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	The state of the s					
· · · · · · · · · · · · · · · · · · ·						

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The date	The dute of each armadment(s) adoption: POSCS 0, 2013 date this document was signed.				
£Τ	ective chare <u>if a policable</u> :				
	(n.	onero them (X) days ofter controlners file deser	_		
Ach	eption of Amendment(s) (C	<u> PRXKONE)</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.				
8	There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were			
	Dated 08/15/2013				
	Signature Many	obell			
	have not been selected	ce chairman of the board, president or other officer-if directors d, by an incorporator – if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	_		
	Mchelle M. Can	mpbell			
	(Typed or	r printed name of person signing)			
	Vice President				
	The second secon	(Title of person signing)			