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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	The Bull Run Unit V	l Homeowners Assoc	riation, Inc.	
	£13000005317			
DOCUMENT NUMBER: _				<u>-</u>
The enclosed Articles of Ame	endment and fee are subn	nitted for filing.		
Please return all corresponder	nce concerning this matte	r to the following:		
The Bull Run Unit VI Home	owners Association, Inc.			
<u> </u>		(Name of Contact Pe	rson)	
My HOA Services, LLC				
		(Firm/ Company)	
1615 Village Square Blvd. S	uite 3			
		(Address)		
Tallahassee, FL 32309				
		(City/ State and Zip C	(lode)	
kathyearlson327@gmail.con	i			
E-	mail address: (to be used	for future annual rep	ort notification	1)
For further information conce	rning this matter, please	call:		
Kathy Carlson		at	850	222.9730
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fo	Howing amount made pay	yable to the Florida D	Department of !	State:
\$35 Filling Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Ac	ldress	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

The Bull Run Unit VI Homeowners Association, Inc	, 			
(Name of Corporation as	currently filed with the Flori	da Dept. of State)		
N135317				
(Documer	nt Number of Corporation (if kn	own)		
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following		
A. If amending name, enter the new name of the co	orporation:			
		The new		
name must be distinguishable and contain the word "c "Company" or "Co," may not be used in the name.	corporation" or "incorporated	" or the abbreviation "Corp." or "Inc."		
B. Enter new principal office address, if applicable	1615 Village Square F	Blvd. Suite 3		
(Principal office address <u>MUST BE A STREET ADI</u>		9 5		
		المسلم المسلم المسلم		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DX) 1615 Village Square I	Blvd. Suite 3		
	Tallahassee, FL 3230	9		
		:		
D. If amending the registered agent and/or registe	and affice address in Florida	anter the same of the		
new registered agent and/or the new registered		and the name of the		
Name of New Registered Agent:	4y HOA Services, LLC			
1	1615 Village Square Blvd. Suite 3			
_	(Florida street address)			
<u>New Registered Office Address:</u> T	allahassee	Florida 32309		
_	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he obligations of the position.		
	Kod I Can (2)	Calson		
	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>Mil</u>	n Doe ke Jones ly <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Chandler, Porter	
Add x Remove			
2) Change	DV	Asbury, Thomas	
Add Remove			
3) Change	DTS	Singletary, Jr. Richard I.	
Add Remove			
4) Change	DP	Scanlon, Jeremy	103 Varsity Dr.
X Add			201 Harpe-Johnson Hall
Remove			Tallahassee, FL 32306
5) Change	DV	Patel, Divyesh	2522 Dahlgren Court
X Add			Tallahassee, FL 32312
Remove			
6) Change	DS	Romano, Joseph N.	2527 Dahlgren Court
Add Add			
Remove			Tallahassee, Fl. 32312

(attach additional sheets, if no	itional Articles, enter change(s) here: eccessary). (Be specific)
dd DT Szoresik, Christal	5805 Dahlgren Trail
	Tallahassee, FL 32312
dd D Graham, Charles D	5864 Dahlgren Trail
	Tallahassee, Ft. 32312
	
	<u>-</u>

	March 14, 2017	
Γhε	e date of each amendment(s) adoption:	if other than the
late	e this document was signed.	
	Continue data if annihumble.	
r.He	ective date <u>if applicable</u> : (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 tument's effective date on the Department of State's records.	listed as the
Add	option 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 amendment(s). The amendment(s) was/were adopted by the board of directors.	
	3/14/2017	
	Dated	
	Signatura	
	(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)	
	Jeremy Scanlon	
	(Typed or printed name of person signing)	
	President/Director	
	(Title of person signing)	