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(Bu	isiness Entity Nan	ne)		
(Document Number)				
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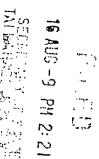


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AUG 18 2016

R. WHILE



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: The Homeowners Association of Country Knolls, II
DOCUMENT NUMBER: N1600003621
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tracy M. Dix (Name of Contact Person)
The Homeowners Association of Country Knolls, Inc.
5200 N. Federal Highway, Suite 2-1149
Ft Lauderdale, Florida 33308 (City/State and Zip Code)
the hoof country knows annual report notification) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tracy M. Dix at 561 932-9453
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)

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

16 AUG -9 PM 2:21

Articles of Amendment to

Articles of Incorporation SECRETARY OF A SUBSTITUTE OF
The Homeowners Association of Country Knolls, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
N 16 00003621 (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following
amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N/A The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 5200 N. Federal Highway Swite 2-1149
Ft. Lauderdale, fl 33308
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent:
5200 N Federal Highway, Suit 2-1149
New Registered Office Address:
Ft Landerdale Florida 33308 (City) (Zip Code)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
ola
Signature of New Registered 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>Mik</u>	n <u>Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP1	Guy Martel	5200 N. Federal Highway Suit 1149 Ft. Lauderdale Fla 33308
2) X Change Add Remove	<u>vp1</u>	Kenneth Martin	5200 N. Federal Highway Suite 1149 Ft. Landerdale Ft 3338
3) Change Add Remove	VP2	Kenneth Martin	5200 N. Federal Highway Suita 1149 Ft. Landerdale, Fl 33308
4) Change Add Remove	<u>VP2</u>	Michelien Morin	5200 N Federal Highway Suite 2-1149 Ft Lauderdale, F1 33308
5) Change Add Remove	<u>S</u> _ 1	Dr. Paula Peet	5200 N. Federal Highway Suite 2-1149 Ft. Landerdale, Fl 33308
6) Change Add Remove	T	Joe Plum Page 2 of 4	5200 N. Federal Highway Suite 1149 F1 Lauderdale, F1 33308
Remove		Page 2 of 4	F1. Lauderdale, F1 33308

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The date of each amendment(s) ado date this document, was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :	N/A (no more than 90 days after amendment)	nt file date)
Note: If the date inserted in this block locument's effective date on the Department.	c does not meet the applicable statutory filir artment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of vot	es cast for the amendment(s)
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The	ue amendment(s) was/were
Dated June	2016 00 11 Niv	
have not been	m or vice chairman of the board, president selected, by an incorporator – if in the hand pointed fiduciary by that fiduciary)	
	Tracy M. Dix (Typed or printed name of per	son signing)
	President - HOA	-