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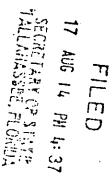




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AUG 2 2 2017 S. YOUNG



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Broadmoor Acres Community Restor	ration and Preservation Inc	
N160 DOCUMENT NUMBER:	00004440		
<del></del> -	. 16		
The enclosed Articles of Amendm	nent and fee are submitted for filing.		
Please return all correspondence c	oncerning this matter to the following	g:	
Lawrence Sinclair			
	(Name of Contact	ct Person)	
BACRAP			
	(Firm/ Com	pany)	
1052 Mitchell Street			
	(Address	s)	
Cocoa, Florida 32922			
	(City/ State and 2	Zip Code)	
larry@broadmooracres.com			
E-mail a	address: (to be used for future annual	report notification)	
For further information concerning	this matter, please call:		
Lawrence Sinclair		386-290-5851	
(Name	of Contact Person)	(Area Code) (Daytime Telephone Numb	per)
Enclosed is a check for the following	ng amount made payable to the Florid	da Department of State:	
□ \$35 Filing Fee □\$4	3.75 Filing Fee & \$\sum \\$43.75 Filing Fertificate of Status Certified Copy (Additional copenclosed)	Certificate of Status	

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

(Name of Corporation as curr	ently filed with the Flori	da Dept. of State)		
N16000004440	-			
(Document Nur	nber of Corporation (if kn	own)		
Pursuant to the provisions of section 617.1006, Florida Stati amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For</i>	Profit Corporation a	dopts the follow	ving
A. If amending name, enter the new name of the corpor	ation:			
	NΙΑ		The n	201
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated	or the abbreviation	"Corp." or "Inc	c."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	N A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA			
			<u> </u>	
). If amending the registered agent and/or registered of	<u>īce address</u> in Florida, e	nter the name of the		
new registered agent and/or the new registered office	address:			-
Name of New Registered Agent:	NA			ے۔ ر آ
<del></del>	(Flor	ida street address)	100 <del>1</del>	_
New Registered Office Address:		,	37	
<del></del>	(Circl)	, Florida	<del></del>	
	(City)	(Zip C	Code)	
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for	i Agent: amiliar with and accept th	e obligations of the n	orition	
	NA	e oonganors of the p	vaillun,	
	Signature of New Register	ed Agent. if changing		_

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 Remove X Add	<u>v</u> <u>m</u>	hn Doe ike Jones Ily Smith	ADDITIONAL ON ATTACHED PAGE.
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	Leola C. Dawkins	1052 Mitchell St
Add X Remove			Cocoa, FL 32922
2) Change	T	Barbara Townsend Green	1052 Mitchell ST
Add X Remove			Cocoa, FL 32911
3) Change	<u>v</u>	Mya Thuzar	1052 Mitchell ST
Add X Remove			Cocoa, FL 32922
) X Change	CEO	Lawrence W. Sinclair	1052 Mitchell St
Add			Cocoa, FL 32922
Change	C	Robert Harvey	29 Riverside Dr #601
X Add Remove			Cocoa, FL 32922
Change	<u>D</u>	David Jackson	3509 Roundtree Drive
X Add			Cocoa, FL 32926
Remove		Page 2 of	5

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
) Change	D, Vice chair	Brenda Warner	143 Circle Dr
X Add			Cocoa, FL 32922
Remove			
3) Change	5D	Alexandra Bernard	880 Kings Post Road
X Add			Rockledge, FL 32955
Remove			
<b>?</b> ) Change	$\underline{D}_{i}T_{\underline{I}}$	Laura West	1106 Broadmoor Dr
<u>X</u> Add			Cocoa, FL 32922
Remove			
) Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove		Page Z of	

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
	•		NA			
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The date of each amendment(s) adoption date this document was signed.	May 8, 2017 1-3 and Aug 5, 2017 4 - 9 ;, if other than th
Effective date if applicable:	
(	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
There are no members or members enti- adopted by the board of directors.	itled to vote on the amendment(s). The amendment(s) was/were
Aug 5, 2017	
Signature	
have not been select	vice chairman of the board, president or other officer-if directors ted, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)
Lawrence W. Sir	nclair
<del></del>	(Typed or printed name of person signing)
Chief Executive	Officer - Executive Director
	(Title of person signing)