N16000005128

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
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TO: Amendment Section · Division of Corporations

NAME OF CORPORATION	Hampton Terrace Cor	nmunity Association	, Inc		-
DOCUMENT NUMBER:	n16000005128				Ų.
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	ence concerning this matter	to the following:		·	
Brian D. Frey					
	(Name of Contact Pe	rson)		
Hampton Terrace Communi	ty Association, Inc.				
		(Firm/ Company)		
1224 E Clifton Street					
	 	(Address)			
Tampa, FL 33604					
	(City/ State and Zip (Code)		
president@myhtca.org	,				
E	-mail address: (to be used	for future annual rep	ort notification	n)	
For further information conc	erning this matter, please of	all:			
Brian D. Frey		at	404	558-5692	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Num	iber)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida E	epartment of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & [Certificate of Status	3\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is sed)	
Mailing A	Address	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

TO ORC 15

Hampton Terrace Community Association, Inc

(Name of Corporation	n as curren	tly filed with the Flor	ida Dept. of State)
n16000005128			
(Docu	ment Numb	er of Corporation (if kr	own)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida Not Fo</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporati	on:	
n/a			The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam		tion" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if application	able:	n/a	
(Principal office address <u>MUST BE A STREET</u> A			
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:		n/a	ı
(Mailing address <u>MAY BE A POST OFFICE</u>	BOX)		
		-	
D. If amending the registered agent and/or registered agent and/or the new registered.			enter the name of the
	п/а		
Name of New Registered Agent:	 n/a		
	11/a	Œl	orida street address)
New Registered Office Address	:	(1 14	riuu sireei aaaressy
	n/a		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered	Agent:	
I hereby accept the appointment as registered age			the obligations of the position.
	<u> </u>		
	Si	ignature of New Regist	ered 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	PT John De V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>T</u>	Brent Williams	1003 E Hanna Ave 1AnpA, 72 33604
2) Change Add			
Remove 3) Change Add			
Remove 4) Change			
Add			
5) Change Add			
Remove 6) Change			
Add		D	

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
` N/A	
IVA	
*	

	date of each amen		if other than the
Effe	ective date <u>if appli</u> c		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not be the on the Department of State's records.	listed as the
Ado	ption of Amendme	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	There are no memiadopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	10/12/2016	
	Signature		
		(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)	
		Brian D. Frey	
		(Typed or printed name of person signing)	
		President, Hampton Terrace Community Association	
i		(Title of person signing)	