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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Townhomes Association,	lnc.		7	<u>.</u>
DOCUMENT NUMBER: N160000110099				((S)
The enclosed Articles of Amendment and fee a	re submitted for filing.				
Please return all correspondence concerning thi	s matter to the following:				
April Jordan					
	(Name of Contact)	Person)			_
West Village LLC					
· 	(Firm/ Compa	ny)			_
6911 Pistol Range Rd., Suite 101A					
	(Address)				_
Tampa, FL 33635					
	(City/ State and Zip	r Code)			_
beth@proluxeproperties.com					
E-mail address: (to l	be used for future annual re	eport notil	ication	1)	_
For further information concerning this matter.	please call:				
April Jordan	:	727			
(Name of Contact	Person)	(Area C	ode)	(Daytime Telephone Number)	
Enclosed is a check for the following amount in	nade payable to the Florida	i Departme	ent of	State:	
□ \$35 Filing Fee □\$43.75 Filing Certificate of \$	Fee & =\$43.75 Filing Fe Status Certified Copy (Additional copy enclosed)	· is	Certif Certif	0 Filing Fee leate of Status led Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	, , , , , , , , , , , , , , , , , , ,	treet Add Amendmen Division of Hifton Bui	t Sect Corp		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

West Village Townhome Association, Inc.

(Name of Corporation as	currently filed with the Florida Dept. of State)
N16000010099	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 617,1006. Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:
Westshore Village Townhomes Homeowner's Association	The new
name must be distinguishable and contain the word "co "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: (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	tistered Agent: I am familiar with and accept the obligations of the position.
	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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sm	<u>nes</u>			
Type of Action (Check One)	Title		<u>Name</u>		Address	
1) Change Add Remove	-	_		-		
2) Change Add		_		-		
Remove 3)ChangeAdd		_		. <u>-</u>		
Remove 4) Change Add		_			-	
Remove Change		_				
Add						
6) Change Add Remove		_	· -			

E. If amending or adding additional Artic	cles, enter change(s) here:
(uttach additional sheets, if necessary).	The specific)
_N/A	
	· · · · · · · · · · · · · · · · · · ·
,	

The date of each amendment(s	adoption:	, if other than the
late this document was signed. Office tive date if applicable:	7/28/17	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.	
■ There are no members or m adopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/were ectors.	
07/28/1 Dated	7	
Signature	Qui Well	
have no	berthian or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)	
Anna	ı West	
	(Typed or printed name of person signing)	
Offic	rer	
	(Title of person signing)	