## N17000006396

(Re	questor's Name)	<u> </u>
(Ād	dress)	
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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DOS RIOS OWNE	RS ASSOCIA	ΓΙΟΝ, INC.			211 JUL - 5
		<u>.                                    </u>			1 JUL-5
					5. 29
	<del></del>				PH 4:
	<u>,</u>				23
		·		Art of Inc. File	
				LTD Partnership File	
				Foreign Corp. File	<del>-</del>
				L.C. File	
				Fictitious Name File	<del></del>
			<u></u>	Trade/Service Mark	_
				Merger File	·
			1	Art. of Amend. File	<del>_</del>
				RA Resignation	
				Dissolution / Withdrawal	<del>.</del>
				Annual Report / Reinstatement	
				Cert. Copy	
			✓	Photo Copy	
			}	Certificate of Good Standing	
				Certificate of Status	
				Certificate of Fictitious Name	
			l	Corp Record Search	<del>_</del>
,				Officer Search	
			<u> </u>	Fictitious Search	
Pianatura	<del></del>		-	Fictitious Owner Search	<del></del>
Signature				Vehicle Search	
			-	Driving Record	
Requested by: BA				UCC 1 or 3 File	
	<u>7/5/17</u>		.	UCC 11 Search	
Name	Date	Time		UCC 11 Retrieval	_
Walk-In	_ Will Pick U <sub>l</sub>	P		Courier	

## Articles of Amendment to Articles of Incorporation of

DOS RIOS OWNERS ASSOCIATION, INC.		
(Name of Corporation as curr	ently filed with the Floric	la Dept. of State)
N17000006396		
(Document Num	nber of Corporation (if kno	OWII)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ates, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
N/A		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated"	
D. Entry way animals of the address of an disable.	N/A	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u> .	<u>s</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered of	files address in Florida e	inter the name of the
new registered agent and/or the new registered office		after the theme of the
Name of New Registered Agent: N/A		
	(Flo	rida street address)
New Registered Office Address:	(	
N/A		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ed Avent:	
I hereby accept the appointment as registered agent. I am		he obligations of the position.
	Standard of New Pagints	and from the bound

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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add Remove			
2) Change			
Add			
3 ) Change			
Remove 4) Change			
Add			
Remove 5) Change			
Add Remove			,
6) Change			
Add			

## E. If amending or adding additional Articles, enter change(s), here: (attach additional sheets, if necessary). (Be specific) ARTICLE TEN is deleted in its entirety and the following ARTICLE TEN is substituted in lieu thereof: "In the event of termination, dissoution or final liquidation of the Corporation, the responsibility for the operation and maintenance of the stormwater management system must be transferred to and accepted by an entity which would comply with Rule 62-330.310, F.A.C., and Applicant's Handbook Volume 1, Section 12.3, and be approved by the St. Johns River Water Management District prior to such termination, dissolution or liquidation. If the association is dissolved, the assets shall be dedicated to a public body, or conveyed to a nonprofit organization with similar purposes.

he date of each ame ate this document wa	endment(s) adoption:, if other	r than t
re ma anchment wa	o organou.	
fective date <u>if appl</u>		
	(no more than 90 days after amendment file date)	
	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed a late on the Department of State's records.	s the
option of Amendn	gent(s) (CHECK ONE)	
The amendment(s was/were sufficie	s) was/were adopted by the members and the number of votes cast for the amendment(s) ant for approval.	
There are no men adopted by the bo	nbers or members entitled to vote on the amendment(s). The amendment(s) was/were oard of directors.	
Dated	June 30, 2017	
Signatur		
	(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)	
	Ashley B. Collins	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	