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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	SUNRISE Subdivisio	on Homeowners Ass	ociation, Inc.		
DOCUMENT NUMBER:	N17000006423				
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		***************************************	
Please return all correspond	ence concerning this matte	r to the following:			
Garrett W. Walton					
		(Name of Contact Pe	erson)		
		(Firm/ Company	()		
2605 Semoran Drive					
		(Address)			
Pensacola, Florida 32503					
		(City/ State and Zip	Code)		
Garrett@HeronsForest.com					
E	-mail address: (to be used	for future annual rep	ort notification)	
For further information conc	rerning this matter, please of	call:			
Garrett W. Walton		at	850	554-6016	
•	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number	r)
Enclosed is a check for the f	ollowing amount made pay	yabłe to the Florida I	Department of S	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	O Filing Fee icate of Status led Copy tional Copy is sed)	

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 curren	tly filed with the F	lorida Dept. of	State)
N17000006423				
(Docur	nent Numb	er of Corporation (i	f known)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not</i>	For Profit Corp	poration adopts the following
A. If amending name, enter the new name of the	e corporati	on:		
N/A				The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorpora	ted" or the abb	reviation "Corp." or "Inc."
B. Enter new principal office address, if applica	ıble:	N/A		
(Principal office address <u>MUST BE A STREET A</u>	(DDRESS)			
				· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	N/A		
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.			la, enter the na	ime of the
-	N/A	uuress:		
Name of New Registered Agent:			 -	
<u>New_Regis</u> tered Office Address:			(Florida street ada	(ress)
	N/A			
		(City)		_, Florida (Zip Code)
Nam Baine and American Cines and Cines		•		(11)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			ept the obligation	ns of the position.
				2010
-	Si	gnature of New Res	gistered Agent, i	2
	F	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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) N/A Change			
Add Remove			
2) Change			
Add Remove			
3) Change Add			
Remove			
4) Change Add	_		
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s)	adoption:	, if other than the
late this document was signed.		
Defective date <u>if applicable</u> :	ecember 28, 2017	
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the l	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendmental.	:nt(s)
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment(s) was/we ctors.	ere
December Dated	r 28, 2017	
Signature	Lain w. Weeken	
have not	airman or vice chairman of the board, president or other officer-if directives selected, by an incorporator – if in the hands of a receiver, trustee, it appointed fiduciary by that fiduciary)	
Garret	t W. Walton	
	(Typed or printed name of person signing)	_
Presid	ent	
	(Title of person signing)	