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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : DIAZ LEYVA & GIL PLLC  
Account Number : I20190000103  
Phone : (305) 203-0673  
Fax Number : (305) 676-8994

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: ddl@dlqplc.com

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**SOUTHERN PINES HOMEOWNERS ASSOCIATION OF**  
**NASSAU COUN**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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COVER LETTERTO: Amendment Section  
Division of CorporationsNAME OF CORPORATION: Southern Pines Homeowners Association  
of Nassau County Inc.DOCUMENT NUMBER: N19000006363The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Diaz Leyva, Esq.

(Name of Contact Person)

Diaz Leyva + Gil PLLC

(Firm/ Company)

1501 Venera Avenue, Suite 203

(Address)

Coral Gables, FL 33146

(City/ State and Zip Code)

DOL@d1gpllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Diaz Leyva, Esq.

(Name of Contact Person)

at (305) 203-0673

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|---|--|

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

H20000112953

Articles of Amendment  
to  
Articles of Incorporation  
of

Southern Pines Homeowners Association of Nassau  
(Name of Corporation as currently filed with the Florida Dept. of State) County Inc.  
N19000006363  
(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new  
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."  
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

17425 Bridge Hill Ct.  
Suite 101  
Tampa, FL 33647

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

17425 Bridge Hill Ct.  
Suite 101  
Tampa, FL 33647


D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Diaz Leyva + Gil PLLC c/o  
Daniel Diaz Leyva, Esq.

New Registered Office Address: 1501 Venera Avenue, Suite 203  
Coral Gables, Florida, 33146  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
Signature of New Registered Agent, if changing

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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:

<input checked="" type="checkbox"/> Change	PI	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add	PD	Jeff Riopelle	17425 Bridge Hill Ct. Suite 101 Tampa, FL 33647
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	TD	Brian Martin	17425 Bridge Hill Ct. Suite 101 Tampa, FL 33647
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	SD	Jim Moyle	17425 Bridge Hill Ct. Suite 101 Tampa, FL 33647
4) <input type="checkbox"/> Change <input type="checkbox"/> Add			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

Page 2 of 4

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

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\_\_\_\_\_  
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STATE OF FLORIDA  
DIVISION OF CORPORATIONS

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☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

1/10/2020

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)

Daniel Diaz Leyva, Esq.

(Typed or printed name of person signing)

Authorized Representative

(Title of person signing)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

