Division of Corporations Electronic Filing Cover Sheet

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(((H23000374065 3)))



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| | Division of Corpora | tions |
| | Fax Number : (8 | 50)617-6380 |
| From: | | |
| | Account Name : C | T CORPORATION SYSTEM |
| | Account Number : FC | 4000000023 |
| | Phone : (9) | 54)208-0845 |
| | Fax Number : (6 | 14)573-3996 |
| | | |
| Enter | the email address for | this business entity to be used for future |
| an | nual report mailings. | Enter only one email address please.** |
| | _ | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN HAMPTON WEST PHASES 2 AND 3 HOMEOWNERS ASSOCIATI

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Help

J DENIUS

From: David Thomas

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Articles of Amendment to Articles of Incorporation

| | Articles of | Incorporation of | 9 n | | | | |
|--|----------------|-----------------------------|---------------------------------------|-------------------------|---|----------|----------|
| Hampton West Phases 2 and 3 Homeowners Associa | ation, Inc. | | | | | | |
| (Name of Corporation as currently filed with the F | Florida Dep | t. of State) | | | | | |
| N20000011166 | | | | | | | |
| (Documer | nt Number o | of Co rporati on | ı (if known) | | | | |
| Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation: | da Statutes, t | his <i>Florida N</i> | sot For Profit Corp | <i>poration</i> ado | pts the fo | llowing | |
| A. If amending name, enter the new name of the c | corporation | i | | | | | |
| | | | | | | he new | |
| name must be distinguishable and contain the word "o "Company" or "Co." may not be used in the name, | 'corporation | " or "incorpe | orated" or the abb | reviation "Co | orp." or | "Inc." | |
| B. Enter new principal office address, if applicable | l . | | | | | | |
| (Principal office address MUST BE A STREET ADD | | | | | | • | |
| | _ | | | | | | |
| | | | | | | | |
| C. Enter new mailing address, if applicable: | | | | | - (2) | 202 | |
| (Mulling address MAY BE A POST OFFICE BC | <u> </u> | | | | <u> </u> | <u></u> | |
| | _ | | | | | | 77 |
| | | | | | .:-₹ У-:: | 96. | <u>=</u> |
| D. If amending the registered agent and/or registe | erul alfice s | atalonee in Fla | vride unter the ne | me of the | = ===================================== | PH | \Box |
| new registered agent and/or the new registered | | | 77 1011 CHANT THE 111 | unik VI IIIk | | PH 4: 43 | |
| Name of New Registered Agent: | | | | | .4 | ည | |
| | | | | | | | |
| _ | | | (Florida street add | ersj | | | |
| New Registered Office Address: | | | | | | | |
| _ | | City) | | _, Florida (Zip Cod | | | |
| | 1 | Ciţ) | | тыр сос | <i>ie)</i> | | |
| New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent. | | | ecept the obligation | ns of the nos | ition. | | |
| - The state of the | | | · · · · · · · · · · · · · · · · · · · | The Try True production | | | |
| | | | | | | | |
| | Signa | ture of New F | Registered Agent, ij | changing | | | |

Τo.

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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:

12122023573

(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, Vas Remove, and Sally Smith, SV as an Add.

| Example: X Change X Remove A Add | V Mik | n Doe e Jones y Smith | |
|---|-----------|--|---|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| Change Add | YO | Todd Jones | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| X Remove 2) Change Add | DV | Geoffrey Reid | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| X Remove 3) Change Add X Remove | <u>DS</u> | Jordan Kuşhner | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| 4) Change Add | DP | Matthew Halliday | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| Remove 5) Change | DVT | Lincoln Palmer | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| 6) Change Add | DS | Joshua Reiter | 280 E. Pilot Road, Suite 200 Las Vegas, NV 89119 |
| E. If amending or add (attach additional sh | | vrticles, enter change(s) heve: j. (Be specific) | |
| | | | |

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

| ated | 10/20/2023 | | | |
|---------|---|--|--|--|
| gnature | | | | |
| | (By the 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) | | | |
| | Matthew Halliday | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |