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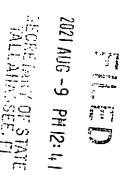
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COVER LETTER

TO: Amendment Section Division of Corporations

MARS HILL OWN NAME OF CORPORATION:	ERS ASSOCIATION,	INC	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
Cat Holladay			
	(Name of Contact Per	son)	<u> </u>
Forestar Group			
	(Firm/ Company)		
24190 US Highway 98, Suite D			
	(Address)		
Fairhope, AL 36532			
	(City/ State and Zip Co	ode)	
catholladay@forestar.com			
E-mail address: (to be use	d for future annual repo	rt notification	1)
For further information concerning this matter, please	e call:		
Cat Holladay	at	251	243-2782
(Name of Contact Persor	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida De	epartment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section		et Address ndment Secti	on.
Division of Corporations	Division of Corporations		
P.O. Box 6327		Centre of T	
Tallahassee, FL 32314	2415	N. Monroc	Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

FILED

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MARS THEE OWNERS ASSOCIATION, INC	
(Name of Corporation as currently filed with the Florida Dept. of	(State) SECULATION OF CHAP
N21000000952	STATE STATE TELLAHAS SEE, FL
(Document Number of C	
Pursuant to the provisions of section 617.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" o "Company" or "Co." may not be used in the name.	r "incorporated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
· · · · · · · · · · · · · · · · · · ·	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	Annahala a akaratar
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
(Ci _t	y) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
l hereby accept the appointment as registered agent.—I am familiar v	vith 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	PT John De V Mike Je SV Sally Sr	ones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change Add	<u>D</u>	CARLA WATERS	24190 US 98, STE. D FAIRHOPE, AL 36532
 X Remove 2) Change X Add 	PD	CATHERINE HOLLADAY	24190 US 98, STE. D FAIRHOPE, AL 36532
Remove 3) X Change Add Remove	ST	MARY MOULTON	4042 PARK OAKS BLVD., SUITE 200 FAMPA, FL 33610
4) × Change Add	<u>V</u>	DINA BROWN	17745 ASHLEY DRIVE PANAMA CITY BCH, FL 32413
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or adding (attach additional sheet)	ng additional Arti	cles, enter chauge(s) here: (Be specific)	

		<u>. </u>

The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not be tent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
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)		
Catherine Holladay		
(Typed or printed name of person signing)		
President		
(Title of person signing)		