N22000008107

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COVER LETTER

TO: Amendment Section Division of Corporations

WEST HYDE PLACE AT SOHO TOWNHOME ASSOCIATION, INC.
N22000008107 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NICKI F. ASMER. ESQ.
(Name of Contact Person)
APPLETON REISS, PLLC
(Firm/ Company)
201 N. HOWARD AVENUE. STE. 200
(Address)
TAMPA. FL 33606
(City' State and Zip Code)
nasmer@appletonreiss.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NICKI F. ASMER 813 542-8888
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
■ \$35 Filing Fee

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

Articles of Amendment to Articles of Incorporation of

WEST HYDE PLACE AT SOHO TOWNHOME ASSOCIATION, INC.

Name of Corporation as currently filed with the Flori	ida Dept. of State)	
N22000008107		
(Document N	umber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not I</i>	For Profit Corporation adopts the followin
A. If amending name, enter the new name of the corp	oration:	
N/A		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	voration" or "incorporat	
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRI	ESS)	
S		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	23
		2
S Ver 19 11 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13		a, enter the name of the
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 	office address in Florid ice address:	a, enter the name of the
NUA	1000000	
Name of New Registered Agent: N.A.		
New Registered Office Address:	(Florida street address)
Wen Registered Office Address.		
		, Florida
	(Ciṇ)	(Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
hereby accept the appointment as registered agent. I ar		ot the obligations of the position.
	Signature of New Regi	stered 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 D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	DIR	SUZY GIUNTA	4010 W. STATE STREET TAMPA, FL 33609
x Remove			
2) Change Add	DIR	LILY OLIVA	4010 W. STATE STREET TAMPA, FL 33609
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Art is, if necessary.	icles, enter change(s) bere: (Be specific)	
-			
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		<u>.</u>
		
 		
		
The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
Effective John If and House		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	es not meet the applicable statutory filing requirements, this date will not b	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted	d by the members and the number of votes cast for the amendment(s)	
was/were sufficient for approval.		

_	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 4423
	Signature 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)
	Anorew ArenA
	(Typed or printed name of person signing)
	Dreiter
	(Title of person signing)