## N22758

| (Red                      | questor's Name)     |                |  |  |  |
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| (City                     | //State/Zip/Phone # | <del>/</del> ) |  |  |  |
| PICK-UP                   | WAIT                | MAIL           |  |  |  |
| (Bus                      | siness Entity Name  | :)             |  |  |  |
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| Special Instructions to I | Filing Officer:     |                |  |  |  |
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T. BROWN

## **COVER LETTER**

T 0: Amendment Section Division of Corporations

| NAME OF CO        | RPORATI              | ON: DAVIS GARDEN                            | NS HOMEOWN  | NERS                                     | S' ASSOCIATION, INC  |
|-------------------|----------------------|---|---|--|--|
| DOCUMENT N        | NUMBER:              | N22758                                      |   |  |  |
| The enclosed A/   | rticles of An        | nendment and fee are subm                   | nitted for filing.  |  |  |
| Please return all | corresponde          | ence concerning this matte                  | er to the following:  |  |  |
| LUISA E. VII      | LLEGAS               |   |   |  |  |
|                   |                      |   | (Name of Contact I  | Person)                                  |  |
| DAVIS GAR         | DENS H               | OMEOWNERS' ASS                              | SOCIATION, IN   | VC                                       |  |
|                   |                      |   | (Firm/ Compar   | ny)                                      |  |
| 6767 SW 67        | TH AVEN              | IUE   |   |  |  |
|                   |                      |   | (Address)   |  |  |
| MIAMI, FLO        | RIDA 33              |   |   |  |  |
|                   |                      |   | (City/ State and Zip  | p Code                                   | )  |
| <u>L</u>          |                      | LEGAS@BELLSOU                               |   |  |  |
|                   |                      | -mail address: (to be used                  |   | epon n                                   | outication)  |
| For further infor | mation cond          | erning this matter, please                  | call:   |  |  |
| LUISA E. VI       |                      |   | at (305   |  | 725-2741   |
| (                 | Name of Co           | ntact Person)                               | (A  | rea Co                                   | de & Daytime Telephone Number)   |
| Enclosed is a ch  | eck for the f        | ollowing amount made pa                     | yable to the Florida  | a Depar                                  | tment of State:  |
| ■ \$35            | Filing Fee           | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fe<br>Certified Copy<br>(Additional copy<br>enclosed) |  | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| الهيدر ا          | Division of P.O. Box | nt Section of Corporations                  | Б<br>С<br>2   | Amendr<br>Division<br>Clifton<br>2661 Ex | Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301  |

## Articles of Amendment to Articles of Incorporation of

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|   | with the Florida Dept, of                   | <u>naic</u> )               |                  |
|---|---|-----------------------------|------------------|
| N22758  | ,   |                             |                  |
| (Document)  | Number of Corporation (if k                 | nown)                       |                  |
| ursuant to the provisions of section 617:1006, F<br>nendment(s) to its Articles of Incorporation: | Florida Statutes, this <i>Florida</i>       | Not For Profit Corporation  | adopts the follo |
| . If amending name, enter the new name of t   | the corporation:                            |                             |                  |
|   |   |                             | The              |
| ame must be distinguishable and contain the wo<br>Company" or "Co." may not be used in the na     | ord "corporation" or "incol<br><u>ime</u> . | porated" or the abbreviatio | n "Corp," or ".  |
| Enter new principal office address, if appli  |   |                             |                  |
| Principal office address <u>MUST BE A STREET</u>  | (ADDRESS)                                   |                             |                  |
|   |   |                             |                  |
| . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC                  | SE BOX)                                     |                             |                  |
|   |   |                             |                  |
|   |   |                             |                  |
| . If amending the registered agent and/or re<br>new registered agent and/or the new regist        |   | lorida, enter the name of   | <u>the</u>       |
| Name of New Registered Agent:   |   |                             |                  |
|   |   |                             |                  |
| New Registered Office Address:  | (Florida street aa                          | dress)                      |                  |
| New Registered Office Address.  |   | _,                          |                  |
|   | (City)                                      | , Florida                   | (Zip Code)       |
|   | (0.13)                                      |                             | (Esp Coue)       |

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 | <u>V</u> <u>Mik</u> | n Doe<br>te Jones<br>ly Smith |                      |
|----------------------------------|---------------------|-------------------------------|----------------------|
| Type of Action<br>(Check One)    | <u>Title</u>        | <u>Name</u>                   | <u>Addres</u> s      |
| 1) Change                        | D                   | JOSEPH SILVA                  | 6707 POINCIANA COURT |
| Add                              |                     |                               | MIAMI, FL 33143      |
| X Remove                         |                     |                               |                      |
| 2) Change                        |                     | ·                             |                      |
| Add                              |                     |                               |                      |
| Remove                           |                     |                               |                      |
| 3) Change                        |                     |                               |                      |
| Add                              |                     |                               |                      |
| Remove                           |                     |                               |                      |
| 4) Change                        |                     |                               |                      |
| Add                              |                     |                               |                      |
| Remove                           |                     |                               |                      |
| 5) Change                        |                     |                               |                      |
| Add                              | <del></del>         |                               |                      |
| Remove                           |                     |                               |                      |
|                                  |                     |                               |                      |
| 6) Change                        |                     | <del></del>                   |                      |
| Add                              |                     |                               |                      |
| Remove                           |                     |                               |                      |

| If amending or adding additional a (attach additional sheets, if necessar) | y). (Be specific) |             |  |
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|                  | e date of each amendment(s) adoption: <u>June 30, 2013</u><br>e this document was signed.  | , if other than the |
|------------------|--|---------------------|
| Effe             | ective date <u>if applicable</u> :   | <del></del>         |
|                  | (no more than 90 days after amendment file date)   |                     |
| Add              | option of Amendment(s) ( <u>CHECK ONE</u> )  |                     |
|                  | The amendment(s) was/were adopted 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 $\frac{7/31/2013}{}$   |                     |
|                  | Signature_ Aufal Militar   |                     |
|                  | (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) |                     |
|                  | oner court appointed fiductary by that fiductary)  |                     |
| Luisa E Villegas |  |                     |
|                  | (Typed or printed name of person signing)  |                     |
|                  | President  |                     |
|                  | (Title of person signing)  |                     |