N29/26

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C. 151/15 JUL 29 2014

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sunset Cov	e Homeowne	ers Association, Inc.
DOCUMENT NUMBER: N29126		
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	-	
	to the following.	
Mara Carter		
(Name of Contact Person)
c/o Blue Crest Managem	ent	
	(Firm/ Company)	
2962 Trivium Circle, Suite	e 203	
	(Address)	
Fort Lauderdale, FL 3331	12	
(City/ State and Zip Code)
mara@bluecrestm	nanagemen	t.com
E-mail address: (to be used		
For further information concerning this matter, please c	all:	
_		745 0000 0000
Mara Carter	at (<u>9</u> 54	745-0899 x-2003 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address		Address
Amendment Section Division of Corporations		ment Section n of Corporations
az.z. or oc.po.unons	2010	· · ·

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



14 JUL 14 PH 1: 28

Sunset Cove Homeowner Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N29126 (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: 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.

[1] Blue Crest Mayagement 2962 Trivium Circle B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 203 Fort Lauderdale, FL 33312 C. Enter new mailing address, if applicable: 2962 Trivium Circle (Mailing address MAY BE A POST OFFICE BOX) Suite 203 Fort Lauderdale, FL 33312 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: (Florida street address) New Registered Office Address:

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.

(City)

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 D V Mike John S SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
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1.44.47	

	date of each amendmen		THE HALL AND A TOTAL	, if other than th
date this document was signed Effective date <u>if applicable</u> :		6/1/2014	SETAETARY OF STATE DIVISION OF CORPORATIONS	
2,,,	<u> </u>	(no more than 90 da	vs after amendibent Miledales PH 1:25	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/w was/were sufficient for ap		the number of votes cast for the amendment(s)	
	There are no members or adopted by the board of		amendment(s). The amendment(s) was/were	
	Dated 6/2	3/2014		
	Signature	Shoretwee		
	(By the		e board, president or other officer-if directors nor – if in the hands of a receiver, trustee, or fiduciary)	
	Simon	e Luke		
		(Typed or printed name of	person signing)	
	Preside	ent of Homeowner A	Association	
		(Title of person	signing)	