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COVER LETTER

TO: Amendment Section Division of Corporations ondominium Association Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Confact Person) 19591 nase Dell south net For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: Payable to □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy Check Already Mailed enclosed) (Additional Copy is Enclosed) Mailing Address Street Address

Amendment Section

Division of Corporations

Tallahassee, Fl. 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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•	Articles of Amendm	ent
	to	2023 FEB 21 AM 10: 15
Name of Corporation or and Corporation or an and Corporation or an and Corporation or an and Corporation or an analysis of Corporation or analysis of Corporation or analysis of Corporation or an analysis of Corporation or analysis of Corporation or an analysis of Corporation or analysis of Corporation or analysis of Corporation or an analysis of Corporation or an	Articles of Incorpora	SSOCIATION TWO
Name of Corporation as currently filed with the	ie Florida Dept. of State)	C
	13439	9
(Docur	ment Number of Corporation	n (if known)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the	e corporation:	
name must be distinguishable and contain the word	I Hanna and Hanna	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	- corporation" or "incorpo !-	orated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicat	ble:	
(Principal office address MUST BE A STREET AL	DDRESS)	
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	0X)	
		
		——————————————————————————————————————
D. Komandt, at		
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Flor	da, enter the name of the
secretarior the new repistered	Office address:	
Name of New Registered Agent:		
No. B. in 100		(Florida street address)
New Registered Office Address:		
_		E1
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regi	letanad A	• •
I hereby accept the appointment as registered agent. I	sterea Agent:	nt sho abliques of the
	ja min unu acce	or the congations of the position.
 -	Signature of Man B	stered Agent, if chanoing
	aignuture of New Regi:	Stered Agent if changing

(Attach additional ; Please note the offi P = President: V=	sheets, if necessar cer/director title h Vice President; T CFO = Chief Fina	y) by the first letter of the of Treasurer; S= Secreta model Officer Manuffic	ffice title:	er/director being removed and til Frustee; C = Chairman or Clerk; Cl than one title, list the first letter of e	
Changes should be a change, Mike Jone Mike Jones, V as Re	noted in the follow es leaves the corpo move, and Sally S	ving manner. Currently oration, Sally Smith is no mith, SV as an Add.	John Doe is listed as the amed the V and S. These	e PST and Mike Jones is listed as the should be noted as John Doe, PT a	e V. There is s a Change,
Example: X. Change X. Remove X. Add	$\underline{\mathbf{V}}$ $\underline{\mathbf{M}}$	<u>hn Doc</u> ike Jones Ily Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change Add	D	Migur	el Otero	3930. 9 Roose, NIOO Key West Fi	ielt BlvD =33640
2) Change Add	<u>D</u>	Christop	ner Rivell	3930 S Ra	severt Bivi
Remove 3) Change Add Remove				Key West Fl	33040
4) Change Add					-
Remove 5) Change Add					_
Remove			-		
6) Change Add					
E. If amending or additional sheet	ng additional Artes, if necessary).	ticles enter change(a) b	e 2 of 4 eere:		

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<u>·</u>	
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	Page 3 of 4
The date of each amendment(s) adoption date this document was signed.	otion:, if other than the
Ellective date it applicable:	(no more than 00 June 6
Note: If the decision is	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirements, this date will not be listed as the timent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)

riere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 13123
Signature Obsoheth Brady
(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)
ELIZabeth Brady (Typed or printed name of person signing)
President LSBOD (Title of person signing)