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14 MAY -1 PM 14:39
SECRETARY CE STATE
FOR EXPLOSED FLORIDA

C. LEWIS

MAY 1.2 2014

EXAMINER

## COVER LETTER

TO: Amendment Section • Division of Corporations

NAME OF CORPORATION: BOYNTON WA	ATERS HOMEOWI	NERS ASSOCIATION INC.
DOCUMENT NUMBER: N48671		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Myra Ehrman		
	(Name of Contact Person	1)
Secretary, Boynton Wate	ers Home Ov	vners Association
	(Firm/ Company)	
9406 Aqua Vista Blvd.		
	(Address)	
Boynton Beach, FL 3343	37-2851	
	(City/ State and Zip Code	2)
myraehrman@gn		
E-mail address: (to be used	·	notification)
For further information concerning this matter, please		
Myra Ehrman	<sub>at (</sub> 954	304-2631
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

APPROVEU ANO FILED

## Articles of Amendment to Articles of Incorporation of

14 MAY -1 PH 4: 39

BOYNTON WATERS HOMEOWNERS ASSOCIATION INC. SECRETARY OF STATE.

(Name of Corporation as current)	v filed with the Florida Dept. of State)	
N48671		
(Doct	ument Number of Corporation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporat	1006, Florida Statutes, this <i>Florida Not For Profit Corpo</i> ion:	pration adopts the following
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corporation" or "incorporated" or the abbre the name.	eviation "Corp." or "Inc."
B: Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>	if applicable: N/A	
		<del></del>
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		
(maining address MATT DE ATT SULT		
		<del> </del>
D. If amending the registered agent and new registered agent and/or the new	<u>d/or registered office address in Florida, enter the namy registered office address:</u>	ne of the
Name of New Registered Agent:	Michael I Hanson	
Nume of New Registered Agent.	6400 W. Boynton Beach Blvd #740065	-
	(Florida street address)	-
New Registered Office Address:		
	Boynton Beach , Florida	33437
	(City)	(Zip Code)
New Registered Agent's Signature, if ch	nanging Registered Agent:	
I hereby accept the appointment as registe	ered agent. I am familiar with and accept the obligation	s of the position.
	Signature of New Registered Agent if changing	
	Page 1 of 4	

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	$\overline{\mathbf{V}}$ $\overline{\mathbf{M}}$	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change  Add  Remove	<u>SD</u>	DELPOPOLO, LINDA	9284 LAKESIDE LN BOYNTON BEACH FL 33437
2) Change Add Remove	<u>PD</u>	HALMO, MARK	9356 LAKESIDE LN BOYNTON BEACH FL 33437
3) X Change  Add Remove	PD	HANSEN, MICHAEL	BOYNTON BEACH FL 33437
4) Change X Add Remove	SD	EHRMAN, MYRA	9406 AQUA VISTA BLVD BOYNTON BEACH FL 33437
5) Change Add Remove	<u>D</u>	LOCKYER, JAMES	9361 CASCADE CT BOYNTON BEACH FL 33437
6) Change Add Remove	<del></del>	Dana 2 a64	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Current Officers:
Hansen, Michael - President (new role)
Brandrup, Claus (Kip) - Vice President (continuing from prior board)
Ehrman, Myra - Secretary (new to the board and new role)
Galvin, Robert - Treasurer (continuing from prior board)
,
•



	e date of each amendment(s) ad te this document was signed.	option: 3/29/2014	FILEU 14 MAY - 1 PH 4: 39	, if other than the
EU	fective date <u>if applicable</u> :	(no more than 90 days after	amendmenifile date) SSEF, FLORED	
		(no more man 20 days after	unchamping in the control of the con	
Ad	loption of Amendment(s)	( <u>CHECK ONE</u> )		
	The amendment(s) was/were ad was/were sufficient for approva		nber of votes cast for the amendment(s)	
	There are no members or membadopted by the board of directo		ent(s). The amendment(s) was/were	
	Dated 4/2:	3/14		
	have not bee		president or other officer-if directors in the hands of a receiver, trustee, or y)	
•		AAFL LAWS		
	4.7	(Typed or printed name of person)	signing)	
	-	(Title of person signing	)	